

Anakapalle Merchants' Association
Konathala Subrahmanyam & Immidisetty Kanakaraju (A S K)

A S K College of Technology & Management

(Approved by AICTE & Affiliated to JNTUK Kakinada)

Dr. VASANTA RAJENDRA PRASAD

B.Tech., M.Tech., Ph.D., PGDES., LM.LI.Ch.E.

Principal

AMAL College Campus,
College Junction, **Kothuru**

Anakapalle– 531 001

Visakhapatnam, A.P., **INDIA**



☎08924-231122(P), 231144(O)

9652858583(M)

Fax: 091-8924231138

E-mail: rpvasanta@gmail.com

principal@askctm.in

www.askctm.in

College code: B4

Date:

APPLICATION FORM FOR ADMISSION UNDER MANAGEMENT QUOTA (CATEGORY-B) ADMISSION

<u>(For Office Use Only)</u>	
Mr./Ms. _____ Rank No _____ _____ is admitted in B. Tech Branch for the academic year 2017 – 18 in this Institute.	(Recent Color Passport Size Photo)
PRINCIPAL	

1. Name of the Candidate (As per SSC)

In CAPITAL Letters :

2. Father's Name/guardian Name :

Father's Qualification/Profession :

Telephone No. Land :

Mobile :

3. Mother's Name :

Mother's Qualification/Profession :

Telephone No. Mobile :

4. Date of Birth (As per SSC) :

5. Mother Tongue :

6. Category :

(OC/BC(A,,B,C,D,E)/SC/ST)

7. SEX :

[Male / Female]

8. Identification Marks :

1.

2.

9. Income as per Income Certificate :

10. Permanent Address with PIN Code :

11. Address for Communication with PIN :

12. EAMCET / ECET RANK :

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13. Qualifications :

S. No.	EXAM	YEAR OF PASSING	COLLEGE/BOARD/UNIV.	PERCENTAGE	MEDIUM
1					
2					
3					
4					

14. *Percentage secured in qualifying exam:

(i.e Maths=200+Physics=100+Chemistry=100)

15. Was there any gap in educational career?

If Yes, give the period and reasons thereof. :

16. Blood Group :

17. E-mail ID of Father/Mother/Guardian :

18. Staying with :

Parents / Hostel / Private Room

19. Serious Diseases, if any :

DECLARATION BY THE STUDENT

I hereby declare that the particulars furnished above are true to the best of my knowledge and I did not suppress any relevant information. I am aware that my admission is liable for cancellation, even at a later stage, if it is established that I suppressed any relevant information. I further declare that I am aware of the University rules that a minimum attendance of 75% is required to appear for the University examination and I will abide by the above University rules. In case of any misbehavior on my part, if my admission is not ratified by the APSCE and University authorities, the Principal of the College may cancel my admission without any prior intimation.

Date:

Signature of the Candidate

UNDERTAKING BY THE PARENT

I hereby undertake that if my ward is admitted, I will ensure that he/she will observe the discipline of the Institute and will pursue his/her studies regularly and with all seriousness. I further undertake that I will pay all the prescribed fees well in time and I will financially support my ward during his/her years of study at the Institute. I am also aware of the University rule that my ward should put in a minimum attendance of 75% to appear for the University examinations and I assure that we will abide by the University rules. I also undertake that it will be the absolute discretion of the college authorities to cancel the admission of my ward at any time, if they find that my ward has violated the rules of discipline, conduct or academic performance. I further promise to extend full co-operation to the staff by enquiring from time to time, regarding the performance of my ward and monitor his/her progress at home.

Date:

Signature of the Father/Mother/Guardian

Dr. VASANTA RAJENDRA PRASAD

B.Tech., M.Tech., Ph.D., PGDES., LM.LI.Ch.E.

Principal

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UNDERTAKING TO BE FILLED IN AND SIGNED BY ALL STUDENTS
(NOW ADMITTED AND OTHER SENIOR STUDENTS)

UNDERTAKING

I, _____ (Name of the Student) admitted / studying First / Second year in _____ (Course) _____ Branch at Anakapalle Merchants Association Konathala Subrahmanyam & Immedisetty Kanakaraju(ASK) College of Technology and Management, Kothuru, Anakapalle–531001, Visakhapatnam Dist. Son/Daughter of Sri./Smt. _____ residing at _____

_____ Pin Code _____ Tel. No. _____ (Permanent Home Address with Phone No. if any),

undertake that I am aware of the system of punishment in case of ragging other students and that in case I become involved in any manner in any ragging case, I am liable for any punishment, as per ragging Act of Government of A.P, including :-

1. Cancellation of Admission.
2. Suspension from attending classes.
3. Withholding/Withdrawing scholarship/fellowship and other benefits.
4. Debarring from appearing for any test/examination or other evaluation process.
5. Withholding results.
6. Debarring from representing the institution in any national or international meet, tournament, youth festival etc.
7. Suspension, expulsion from hostels.
8. Rustication from the Institution for periods varying from 1 to 2 academic years.
9. Expulsion from the Institution and consequent debarring from admission to any other Institutions.
10. Rigorous imprisonment up to three years (By court of Law) etc.

Signature of the Parent

Signature of the Student

Date: