

	Application for Admission to Second Year ☐ /Third Year ☐ /Final Year B.Tech ☐ For the Academic year 2025-26 USHA MITTAL INSTITUTE OF TECHNOLOGY S.N.D.T. Women's University, Sir Vithaldas Vidya Vihar, Juhu, Santacruz (W), Mumbai – 400 049. Tel.No. 022 – 26606040 (O), 022 – 2660 5183 (P), Fax.No. – 022 – 2660 5183.	Please paste a passport size Photograph here, Do NOT Staple (Photo should not exceed the borders)	
Roll No.: _____	Branch Name : _____		
Kindly read important notes before filling-in form: 1. Use black ink to fill in the form and Do NOT overwrite. 2. Fill in all fields in CAPITAL Letters only		Student should sign strictly inside this box only with black ink →	
Applying for Concession SC/ST/DT-NT/OBC/SBC/SEBC	Admitted against which Category : Open / Reserved	If Reserved Specify :	
1. Personal Information Section			
	Last Name	First Name	Middle Name
Name of the Student (in case of changed name write current name)			
Name of the Student : (In Devanagari)			
Name of the student as printed on Std. XII Passing Certificate			
Father's / Husband's Name			
Mother's Name			
Previous name of the student (In case of changed name)			
Reason for name change : Willingly / After Marriage		Marital Status : Unmarried / Married / Divorced / Widowed	
UMIT Permanent Roll No.:		Date of Birth (DD/MM/YYYY) : / /	
Place of Birth :		Blood Group (with Rh) :	
Religion :		Citizen of (Country Name) :	
Students Location Category : Rural / Urban / Tribal			
Address for Correspondence :			
State :	District :	Tehsil :	City/Town/Village :
Address : (House no, Street / Area / Suburb etc.)		PIN Code	
Permanent Address [Write only if different than 'Address for Correspondence']			
State :	District :	Tehsil :	City/Town/Village :
Address : (House no, Street / Area / Suburb etc.)		PIN Code	
Contact Details :			
Phone # 1 : STD Code : Phone No.:		Phone # 2 : STD Code : Phone No.:	
Mobile Number :		Email ID :	
2. Legal Reservation Information Section :			
Domicile of State :		Category : Open / Reserved	if Reserved : SC/ST/DT(A)/NT(B)/NT(C)/NT(D)/OBC/SBC/SEBC/EWS
Caste :	Sub Caste :	If Physically Challenged : Visually Impaired / Speech and / or Hearing Impaired / Orthopedically Impaired / Learning Disabled	

3. Guardian Information Section :				
Occupation of the Guardian : Service / Business / Profession / Farmer / Laborer / Retired			Annual Income of the Guardian (Rs.) (last financial year)	
Relationship of guardian with applicant :			Phone No.:	
4. Educational Details Section :				
Last Qualifying Exam Details :				
Students Location Category : Rural / Urban / Tribal				
Name of the Qualifying Examination :				
Year	Year of Passing	Seat No.	G.P.A.	Remarks
5. Attached Documents and Certificates Section :				
Sr.No.	Name of the Document / Certificate	Attested True Copy		Attached (Yes/No)
1	Previous Semesters Marksheet	Attested True Copy		
	<u>FOR FREESHI/SCHOLARSHIP STUDENTS</u>			
1	Previous Semesters Marksheet	Attested True Copy		
2	Caste Certificate & Caste Validity Certificate	Attested True Copy		
3	Current Year Non-Cremy Layer Certificate	Attested True Copy		
4	Current Year Income Certificate (Tahasildar / Form No.16)	Attested True Copy		
5	Ration Card (Front & Back)	Attested True Copy		
6	Current Year Fee Receipt	Attested True Copy		
7	One Photograph			
6. Other Information Section :				
Mother Tongue :		Employment Status : Employed / Unemployed		
Would you like to apply for Hostel : Yes / No				
Personal Identification Marks :	1.	2.		
7. Declaration by Student :				
I hereby declare that, I have read the rules related to admission and the information filled in by me in this form is accurate and true to the best of my knowledge. I will be responsible for any discrepancy arising out of the form signed by me and I undertake that, in absence of any document, the final admission will not be granted and/or admission will stand cancelled. I am aware of the Maharashtra Prohibition of Ragging Act, 1999, and I state that I will abide by all the rules and regulations of the said Act.				
Place:		Date:		Signature of the Student:
8. Declaration by Guardian :				
I have permitted my daughter / son / ward to join your college. The information supplied by her/him is correct to the best of my knowledge. I have acquainted myself with the fees, dues and rules applicable to my daughter / son / ward and to see that she / he observes them.				
Place:		Date:		Signature of the Guardian:
9. For College / Institute Use Only :				
Designation	Remarks / Particulars / Recommendations			Signature and Date
Admission Clerk				
Admission Committee				
Accountant	Cash / D.D. Received Rs.	Receipt No.:		
Administrative Officer				
Principal				