Application for Admission to Second Year ☐ /Third Year ☐ /Final Year B.Tech ☐

For the Academic year 2026-27

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

Please Turn Over

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	
	FOR FREESHI/SCHOLARSHIP STUDENTS		
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			