

**Application for Admission****Form No. IC/***For Office use only***Short Term Course on  
Embedded System****Year:****Batch:***Passport Size  
Photograph*

**IC Centre  
Jadavpur University**  
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**Instruction for Applicants**

- 1] Fill up the Application for in CAPITAL letters only. Use black ink to fill up the form.
- 2] All applications should fill up the form in full. If any item is not applicable, please cross it out or Write "NA". In the space provided. Incomplete forms shall be rejected.
- 3] Applicants are advised to retain a photocopy of the filled in Application Form for future reference.

**Name:****Date of Birth:**

[Attested copy of Certificate/Admit Card to be enclosed]

**Sex:****Address for Correspondence:** \_\_\_\_\_

\_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Pin \_\_\_\_\_

Phone \_\_\_\_\_ email \_\_\_\_\_

**Permanent Address:** \_\_\_\_\_

\_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Pin \_\_\_\_\_

Phone \_\_\_\_\_ email \_\_\_\_\_

**Nationality:****Whether Belong to SC/ST: Yes / NO****Disability: Yes / No.****Father's/Guardian's Name:** \_\_\_\_\_**Education:** [Std. XII Onwards] [Attested copies of Mark sheets/Certificates to be enclosed]

Exam. Passed	Board/University	Year Passed	Specialization	% of Marks

**Software Course (if any)** [Attested copies of Mark sheets/Certificates to be enclosed]

Course	Institution	Duration	From	To	Certificate [Diploma/Degree]

**Work Experience** [if applicable]

Organization	From	To	Functional Area	Software Experience (if any)	If Yes. Duration

Demand Draft No.	Date	Name of the Bank	Amount

**Any other information relevant to this application:**

**Declaration:**

The information furnished by me is true to the best of my knowledge and belief any statement made in the application form, if found incorrect on scrutiny, will render the application liable to rejection and admission, if granted on the basis of the statement, will stand cancelled.

**Date of Application:**

**Place:**

\_\_\_\_\_  
**Signature of Applicant**