



# B.I.S. GROUP OF INSTITUTIONS

## REGISTRATION FORM

No. /BISCOET/COP/INST.....

### Course Applied

Engineering & Technology : B.Tech CSE ☐ ECE ☐ ME ☐ CE ☐ (LEET) ☐  
Commerce & Management : BBA ☐ MBA ☐  
Pharmacy : D.Pharm. ☐ B. PHARM. ☐ (LEET) ☐  
Computer & IT : BCA ☐ LEET ☐  
Med. Lab Sci. : DMLT ☐ B.Sc.-MLS ☐ (LEET) ☐ M.Sc. MLT ☐  
Paramedical : B.Sc.- R&I ☐ B.Sc.- A&OTT ☐  
Diploma : CSE ☐ EE ☐ ME ☐ ECE ☐ CE ☐ (LEET) ☐  
ITI. : COPA ☐ DM ☐ Welder ☐ Plumber ☐

**Affix Passport Size  
Self Attested  
Colour Photograph**

Full Name

Capital Letters

Father's Name

Capital Letters

Mother's Name

Capital Letters

Date of Birth

D/M/Y

Full Address

Category : (Gen/OBC/SC/ST) Marital Status (Single/Married/Other)

District

State

PIN

Contact No.

Self

Guardian/Father

E-mail

Aadhar No.

Facilities you like to opt for (please)

☐

Hostel

☐

Transport

Details of Educational Qualifications from Matriculation / SSC onwards.

Examination Passed	University / Board / Institution	Year of Passing	Main Subjects	% Marks	Division/ Class/Grade

### DECLARATION:

\* I declare that I have carefully understood the norms & procedure for taking admission at B.I.S. I do understand that my admission is subjected to eligibility verification by the university.

\* I undertake to deposit scholarship amount within one week of receipt in my bank account and I will not pay others charges except transport charges if any (Only for SC student)

Signature of Guardian

Signature of the Applicant