Indian Institute of Information Technology Allahabad

((*A University Established under Sec. 3 of UGC Act, 1956 vide Notification No. F.9-4/99-U.3 Dated 4/8/2000 of the Govt. of India)*
(A Centre of Excellence in Information Technology, Established by Govt. of India)
Devghat, Jhalwa, Allahabad -211 012 (U.P.), INDIA
Ph. 0532-2922025/2431692; **Fax.** 2431689/ 2430006; **Web:** www.iiita.ac.in; **E-mail:** contact@iiita.ac.in

Application Form For Admission To MBA (IT) / MSCLIS Programme – 2010 - 11

(For filling this application form see instructions overleaf)

Program for which Admission is sought: (Please Tick only one)

I. MBA in Information Technology - MBA(IT) ☐

II. Master of Science in Cyber Law & Information Security - MSCLIS ☐

Paste your Self attested photograph here

Either TYPE or filled by hand writing using Capital Letters

CAT Registration No*. ☐☐☐☐☐☐☐☐☐ **(MBA-IT Candidates Only)**

CAT Center Code * ☐☐ **(MBA-IT Candidates Only)**
**** As in the CAT Admit Card***

1. FULL NAME : _____

2. DATE OF BIRTH : _____ **3. PLACE OF BIRTH :** _____ **4. SEX :** MALE/FEMALE

5. MARITAL STATUS : _____ **6. NATIONALITY :** _____

7. FATHER'S NAME : _____ **Mother's Name** _____

8. ADDRESS FOR CORRESPONDENCE : _____

_____

_____

_____**STATE :** _____ **PIN CODE :** _____

9. Please provide :
Phone No. : (_____)_____Fax No. : (_____)_____ E-mail address : _____

10. Details of Demand Draft (For Downloaded/ Xeroxed Forms only)
Pl. make sure that Demand Drafts issued are 'MICR' TYPE only
a) Amount Rs. …….. No. ……. Dated……

b) Bank & Branch issued ……

11. Category

GE	SC	ST	OBC	SN	NR	PH

(Please TICK only)

12. A. CAT exam details (*) / GMAT Score details for NRI / Foreign Nationals Program/ NOT for Sponsored candidates

(APPLICABLE TO APPLICANTS FOR MBA –IT PROGRAM ONLY)			
Exam Name	**Exam discipline**	**Percentile Score**	**Exam Year**
CAT / GMAT			

B. Qualifying Degree (*) already obtained or in progress

University/ Institute	Discipline	Degree	Exam Date	Final results expected by	Min. Pass Marks % or Grade Average	Overall % or Grade Average (if degree completed

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C. Working Experience (**) (Latest three only)

Dates (from –to)	Employer	Position	Nature of Work

13. Declaration by the applicant:

Certified that all information provided by me in this form is correct to the best of my knowledge and belief. I understand that any willful misrepresentation of facts will result in my admission being cancelled / dismissal from the Institute. If admitted, I shall abide by all the rules and regulations of the Institute.

Date : _____ **Signature of Candidate _____**

Place : _____

14. Declaration by Parent/ Guardian (Not to be filled by sponsored candidates)

In the event of Mr./Ms. _____ son/ daughter/ ward being admitted, I hereby give an undertaking to pay regularly all admissible dues to the Institute and Hostel till the completion of his/ her studies. I also undertake the responsibility for his/ her good conduct.

Date : _____ **Signature of Parent/Guardian_____**

Place : _____

(*) Attach attested copies of certificates, marksheet etc. See checklist as under for certificates required.
(**) A candidate presently working (including those on projects) must provide a "No Objection/Relieving certificate" from the employer.
($) Photocopies of this form or copies downloaded from IIIT-Allahabad website (http://www.iiita.ac.in) are acceptable, however, photocopies or downloaded forms must accompany the required Demand Draft of Rs.1000/ Rs.500, as the case may be, drawn in favour of IIIT-Allahabad and payable at Allahabad.

INSTRUCTIONS FOR FILLING THIS FORM

1. **Either TYPE or filled by hand using capital letters or in clear handwriting the entries on the form neatly.**
2. **All items marked with an asterisk (*) require you to submit an attested copy of some document. PLEASE DO NOT SEND ORIGINALS. Documents for which attested copies are required are given in the checklist. Please tick off the items in this checklist you are attaching to this form.**
3. **The application fee of Rs.1000/- for candidates in general category (Rs.500/- for SC/ST candidates) must be paid through demand draft payable to "IIIT-Allahabad" at Allahabad.**
4. **Item 11: Category**
   SC* : Scheduled Caste; ST* : Scheduled Tribe; OBC* : Other Backward Cast; GN : General, NR* : Non Resident Indian; PH* : Physically Handicapped; SN* : Sponsored;

Checklist (Please Circle The Enclosed Documents). Send Only Attested Copies (DD & Sponsor's certificate in Original please.)

1. **Date of birth (DOB) certificate or High School (Class Ten) Certificate with DOB (Required for all candidates)**
2. **SC/ST/PH/ OBC Certificate if applicable (Item 11)**
3. **Sponsorship certificate for sponsored candidates. (Item 11)**
4. **CAT / GMAT score card (Item 12 A)**
5. **Copies of mark/grade sheets (Item 12 B)**
6. **No Objection/relieving Certificate from employer (for sponsored candidates only)**
7. **The Demand draft for application fee of Rs.1000/- (or Rs.500/- as applicable) (only in cases where application form has been downloaded from website or photocopied)**
8. **Three letters of reference (for all GMAT qualified & Sponsored applicants)**
9. **Equivalence Certificate in case Grades are awarded by the Qualifying Degree granting Institution.**

SPONSORSHIP CERTIFICATE
(for sponsored candidates only)

(This should be typed on a letterhead of the Sponsoring Organization and enclosed with application for admission).

To,
The Director,
Indian Institute of Information Technology Allahabad
Devghat, Jhalwa,
Allahabad -211 012 (U.P.), INDIA

Sub : Sponsoring of our employee for MBA (IT) / MSCLIS Program at IIIT-Allahabad.

Dear Sir,

We hereby Sponsor the candidature of Mr. / Ms. _____, an employee in our organization, for joining his/ her MBA(IT) / MSCLIS Programme at your Institute as a full-time candidate.
He/ She has been employee of our organization for _____years.
We shall bear the total expenses of his/ her studies. We shall fully relieve him/ her of his/ her duties in the organization during the entire period of the MBA (IT) / MSCLIS Program to enable him/ her to devote full time to the studies.

We also certify that his/ her conduct at our organization has been good.

Signature and Seal of
The Sponsoring Authority

Date:

Indian Institute of Information Technology Allahabad

(A University)

(A Centre of Excellence in Information Technology, Established by Govt. of India)

Devghat, Jhalwa, Allahabad -211 012 (U.P.), INDIA

Ph. 0532-2552380/2431692; **Fax.** 2431689/ 2430006; **Web:** www.iiita.ac.in; **E-mail:** contact@iiita.ac.in

(Applicable only for Sponsored / GMAT Applicants)

LETTER OF REFERENCE

CONFIDENTIAL

Note to the Candidate:

Please give this form to a referee who can help us in evaluating your academic potential for persuing …….. in your desired field of study. The referee may be requested to mail it directly to us after filling it. Please however fill in your name & desired program of study, before handing this form over to the referee;

Name of the Applicant (Surname First)

Programme to which admission is sought

1) MBA (IT) ☐

2) Master of Science in Cyber Law & Information Security ☐

Note for Referee

To help us in the appraisal of the candidate's case for admission to a Post graduate programme at IIIT-Allahabad, you are requested to fill in the following information to the best of your knowledge. This information will be treated as strictly confidential.

1. I have known the applicant for past _____ years.

2. My knowledge of this candidate is based on (please tick):

☐ Having him/ her in one or more courses.

☐ Knowing him/ her personally

☐ Supervision of his/ her thesis/ project

☐ Inquiry and discussion with my colleagues

☐ Interaction with him/ her in connection with his/ her conference Paper Presentation/ Project/ other Technical Discussions

3. Performance in my Courses:

Course Title	No. of Students	Grade	Remarks

4. The candidate ranks approximately _____ in a class of about _____ students.

5. A note on general observations about the candidate including his/ her professional achievement, etc., if any

(Please attach separate sheet, if required.)

6. My rating of the candidate in Following trials (please tick):

	Excellent	Good	Fair	Unable to judge
Analytical Ability				
Experimental Skills				
Motivation				
Written and Oral Expression				
Responsibility & Initiative				
Teaching Ability				
Sincerity & Dedication				

7. To summarize, I would like to say that the applicant (please tick) :

- [ ] is likely to become a brilliant scholar or an outstanding leader in his/ her chosen field.
- [ ] is likely to do very well in the Post Graduate programme.
- [ ] is likely to perform satisfactorily.
- [ ] is not a good prospect.

8. My recommendation :

- [ ] I recommend him/ her enthusiastically
- [ ] I recommend him/ her
- [ ] I do not recommend him/ her

Name of the Referee _____ Signature _____

Designation/ Position _____ Date _____
(with Name & Address
of Organization) _____

Address _____

_____

Pin Code_____Fax : _____

Telephone No. (with STD code) _____ (Office)_____(Residence)_____(Cell)

Professional qualification of the Referee _____

Please mail this form directly to :

The Incharge Examination Cell
Indian Institute of Information Technology Allahabad
Devghat, Jhalwa, Allahabad -211 012 (U.P.), INDIA

MEDICAL EXAMINATION REPORT

(To be issued by a Registered Medical Practitioner only)

GENERAL EXPECTATIONS

Candidates will have good general physique with

a) Chest Measurement should not be less than 70 cm, with satisfactory limit of expansion and contraction.
b) Vision should be normal. In case of defective vision, it should be corrected to 6/9 in both eyes or 6/6 in the better eye.
c) Hearing should be normal. Defective hearing should be corrected.
d) Heart and lungs should not have any abnormality and there should be no history of mental disease or epileptic fits.

PERSONAL HISTORY

1. Name ……

2. Parent/ Guardian's Name:
   (a) Father's Name …….
   (b) Mother's Name …….

3. Age: …… Years …….. Months……

4. Sex:……..

5. Identification Marks on the Body: ……
   (This can be a mole, scar or birthmark.)

6. Major illness / operation: ……
   (Specify nature of illness / operation.)

MEDICAL CERTIFICATE

(The following are to be filled by the Medical Officer conducting the medical examination.)

1. Height :……cm.

2. Weight:……kg.

3. Past History:
   a) Mental Disease ….....
   b) Epileptic Fit ……...

4. Chest :
   a) Inspiration…….cm.
   b) Expiration……..cm.

5. Blood Group ……..

6. Hearing:……

7. Vision with or without glasses :
   a) Right eye : ……..
   b) Left eye : ……
   c) Colour Blindness :…….
   d) Uniocular Vision :…….

8. Respiratory system :……

9. Nervous system :……

10. Heart :

a) Sounds :……..

b) Murmur :…….

11. Abdomen :

a) Liver: …….

b) Spleen :……

12. a) Hernia :……

b) Hydrocele :……

13. Any other defects :……

Certified that …….

son/daughter of ……

a) Fulfills the prescribed standard of physical fitness and is FIT for admission to MBA(IT) / MSCLIS Programs offered by IIIT-A.

b) does not fulfill the prescribed standard of physical fitness and is unfit / temporarily unfit to admission due to following defects :

_____ _____

Signature of the Medical Officer **Signature of the Candidate**

Full Name :…….

MCI Registration No. ……

Official Seal :…….

Date :……