



REGISTRATION FORM

BPL CATEGORY

REGIONAL INSTITUTE OF SCIENCE & TECHNOLOGY

Affiliated to NEHU-Shillong & Approved by AICTE, New Delhi

Techno City, Kling Road, Baridua, GS Road, 9th Mile, Ri-Bhoi, Meghalaya

Affix your
passport size
photograph here

Registration No. :

Course Applied for : (Enter Your Choice preference wise as 1,2,3,..... in free Blocks)

B.Tech Courses

Electronics & Commn. Engg.(ECE)	<input type="checkbox"/>	Computer Science & Engg. (CSE)	<input type="checkbox"/>	Civil Engineering (CE)	<input type="checkbox"/>
Electrical & Electronics Engg.(EEE)	<input type="checkbox"/>	Mechanical Engineering (ME)	<input type="checkbox"/>		

Full Name (in block Letters) : _____

Father's Name : _____

Mother's Name: _____

Date of Birth : Sex : Male / Female Religion :

Nationality : E-mail ID

Correspondence Address :

Permanent Address :

Phone No. with STD code : Mobile NO. :

Caste/Category : General/SC/ST/ OBC/MOBC/ Minority/ Others (Specify) : _____

Specify the BPL Category: _____

Academic Background :

Name of Examination	Year of Passing	School/College	Board/ University	Division/ Grade	Aggregate % age	PCM/ PMB % age

Recommendation From : (1)

Phone :

(2)

Phone :

DECLARATION BY APPLICANT

I, Mr./Ms.....do hereby declare that the information furnished in this **Registration Form** are true & correct to the best of my knowledge and belief. I agree that I will submit all the documents & fulfill all other requirements at the time of admission in accordance with the rules and regulations of RIST & University.

Verified
Chairman, ERDF

Signature of Applicant