



Form No -----

**CHHATTISHGARH SWAMI VIVEKANAND TECHNICAL UNIVERSITY, BHILAI**

Newai, P.O.-Newai, District-Durg, Chhattisgarh, PIN-491107, Ph 0788-2200062

**APPLICATION FORM FOR M.TECH IN BIO MEDICAL ENGINEERING & BIO INFORMATICS (Session 2017-2018)**

1. Name of the candidate in block capital


Affix self  
attested  
passport size  
Photograph

2. Date of Birth

Day			Month			Year		

3. Father's/Husband's Name:


4. Address:


5. Mobile Number

--	--	--	--	--	--	--	--	--	--	--	--

6. Nationality:

--	--	--	--	--	--	--	--

7. Category (Tick which ever applicable):

UR	SC	ST	OBC	PH.
----	----	----	-----	-----

8. Gender

M	F
---	---

9. Examinations Passed 10+2/HSSC onwards: (Pl enclose proof)

Sl	Name of Exam	Board/University	Div/Class	% Marks	Encl no

9. Works Experience if any ( Pl enclose proof)

Sl	Name of the Employer	Designation	Duration		Encl no
			from	to	

**Declaration**

The information given above is true to the best of my knowledge. I agree to abide the rules & regulations of the University.

Date:

(Signature of the candidate)

Place:

**For use of in-service candidate**

Mr/Ms -----is permitted to attend the above course.

Date:

(Signature of competent Authorities)

**For office use only**

Received Rs ----- as the Application form fee from Mr/ Ms.-----

Date:

Place:

(Account officer CSVTU, Bhilai)