

ANNAMACHARYA INSTITUTE OF TECHNOLOGY & SCIENCES

(AUTONOMOUS)

NEW BOYANAPALLI, RAJAMPET-516126 I B. Tech. (R14)



(Read the instructions given below carefully before filling the application)

Month & Year of Examination	Appli	cation for	(Regular / Supplementary)
Name of the Candidate (as per S. S. C.) Father's Name (as per S. S. C.) Mother's Name Date of Birth (as per S. S. C.) D D M M Y Y Y Y Y Mobile NUMBER E-Mail ID: Details of subjects Registered: (Tick [√] the appropriate box) 1 4GC11	Mont	h & Year o	Examination
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All entries should be in candidate's own handwriting. Candidate will be held responsible for any incorrect entry that he/she makes. Any false or incorrect statement in the application will render the candidate liable disciplinary action.	Cand All er Cand Any discip	idates are intries shou idate will be false or in olinary acti	e held responsible for any incorrect entry that he/she makes. correct statement in the application will render the candidate liable ton.
The filled in application should be submitted in the Examination Section.		_	
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