## ANNAMACHARYA INSTITUTE OF TECHNOLOGY & SCIENCES

## (AUTONOMOUS) NEW BOYANAPALLI, RAJAMPET-516126 IV B. Tech. I Semester (R15) (Read the instructions given below carefully before filling the application)



Application for (Regu	ılar / Supplementary)
Month & Year of Exam	mination
HALL TIC	KET NUMBER 0 4
Name of the Candid	ate (as per S. S. C.)
Father's Name (as p	oer S. S. C.)
Mother's Name	
Date of Birth (as pe	r S. S. C.)  D D M M Y Y Y Y
Mobile NUMBER	
E-Mail ID:	
	Registered: (Tick [ $\sqrt{\ }$ ] the appropriate box)
1 5G472	Computer Networks
2 5G371	Optical Communication
3 5G372	Embedded Systems
4 5G373	Digital Image Processing
<u> </u>	al Elective-II
5G374	Digital Design Through Verilog HDL
5G375	Nano Electronics
5G376	Reliability Engineering
6 5G377	MOOC
7 5G37A	Comprehensive Electronics & Communication Engineering
8 5G37B	Microwave and Optical Communication Lab
9 5G37C	Embedded Systems Lab
In case of Supplemer Subjects Reg	gistered Marks Memo: 30.00 Fine Fee:
	Total Amount:
Certified that the abo	ve information is CORRECT and Filled by me.
Submission Date:	Signature of the candidate
Instructions:	
	acted to be very careful about the entries to be made in the application.
	in candidate's own handwriting.
	d responsible for any incorrect entry that he/she makes.
	tatement in the application will render the candidate liable to disciplinary action.  Ation should be submitted in the Examination Section.
Office Use Only F	See Receipt Number: