APPLICATION FORM FOR DNS - DEC 2013 COMMON ENTRANCE TEST

FOR OFFICE USE ONLY

ENROLLMENT NO : [Redacted]

ONLY FOR DNS

SPONSORED [ ]  NON SPONSORED [ ]

NAME OF SPONSORING SHIPPING COMPANY ( TO BE FILLED BY THE SPONSORING CANDIDATES ONLY) :

APPLICATION TO BE FILLED IN CAPITAL LETTERS

1. Name of the candidate : [Redacted]
2. Father's (or) Mother's Name : [Redacted]
3. Sex : Male [ ] Female [ ]
4. Address for Correspondence 1st line : [Redacted]

2nd Line : [Redacted]

City : [Redacted]
State : [Redacted]
Pincode : [Redacted]

5. Contact Number -
   Mobile : 0 [Redacted]
   Telephone No with std code : [Redacted]

6. Email id in capital letters : [Redacted]

7. Date of Birth  DD/MM/YYYY : [Redacted]

8. Age : [Redacted]

9. Religion : [Redacted]

10. Category : GENERAL [ ] SC [ ] ST [ ] OBC [ ]

11. Nationality : INDIAN [ ] OTHERS [ ]

Others means specify________________________
12. Territory Code: Urban ☐ Rural ☐

13. Exam Center Name: [Insert exam center name]

14. Exam Center Code: [Insert exam center code]

15. BANK NAME: STATE BANK OF INDIA ☐ INDIAN BANK ☐ AXIS BANK ☐

JOURNAL NO. [Insert journal number]

DATE [Insert date]

AMOUNT Rs. [Insert amount]

16. Relevant Educational Qualification (which make you eligible for the programme)

<table>
<thead>
<tr>
<th>Qualification</th>
<th>Main Subjects</th>
<th>Year of Passing</th>
<th>% of marks in PCM/B.Sc., (Final Year) / B.Tech</th>
<th>Name of the Board</th>
</tr>
</thead>
<tbody>
<tr>
<td>10 +2</td>
<td>PHYSICS</td>
<td>☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐</td>
<td>☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐</td>
<td>☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐</td>
</tr>
<tr>
<td></td>
<td>CHEMISTRY</td>
<td>☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐</td>
<td>☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐</td>
<td>☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐</td>
</tr>
<tr>
<td></td>
<td>MATHS</td>
<td>☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐</td>
<td>☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐</td>
<td>☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐</td>
</tr>
<tr>
<td></td>
<td>Overall Percentage</td>
<td>☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐</td>
<td>☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐</td>
<td>☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐</td>
</tr>
</tbody>
</table>

Highest Percentage of marks obtained in English in 10th ☐ or 12th ☐ or B.Sc./B.Tech ☐ examinations. ☐ ☐ ☐ ☐ ☐ %.

(Board/University must be approved / recognized by the Govt. of India)

DECLARATION BY APPLICANT

I hereby declare that I have read and understood the conditions of eligibility for the programme for which I am seeking admission. I fulfil the minimum eligibility criteria for this programme as prescribed in the prospectus. I have provided necessary and relevant information. In the event of any information being found incorrect or misleading, my candidature shall be liable to cancellation by the University at any time and I shall not be entitled to refund of any fee paid by me to the University. Further, I have carefully studied the rules of the University as printed in the Prospectus and I accept them and shall not raise any dispute in future over the same rules. I further declare that I am medically fit as per the standards set by Merchant Shipping Medical Examination Rules, 2000, as amended from time to time and have also got my eye-sight checked from a qualified Eye specialist who has certified that I possess 6/6 eye-sight in both eyes and do not suffer from colour blindness and therefore I shall not be entitled for any refund of fee paid to IMU at any stage of admission in case I am declared ineligible during MMD eye-sight test Medical Fitness Test.

Date: [Insert date]

Signature of the Candidate

CHECK LIST

Before submitting the application form please make sure that you have affixed your photograph and signed over it and attached the following (Tick the relevant boxes):

☐ i. Challan for Application Fee for Rs. 1000/- (Rs. 700/- in case of SC/ST Candidates or Challan Copy or Proof of Payment to Bank)