Sponsorship (Deputation) Certificate (For admission to M.Tech / M Tech (Research) / PhD Programme(under Full time Sponsored student category) during the academic year 2024-25

The applicant (name)...... has been a permanent staff of this Institute/Organization from and has years of experience (teaching/R&D/industry) in this organization.

He/She is sponsored (deputed) with full Salary, for full time study /Research for M.Tech /M.Tech (Research) / Ph.D (tick the relevant programme) in National Institute of Technology Karnataka, Surathkal and his / her sponsorship will not be withdrawn before the completion of the course / programme.

Official Seal

Station:

Signature of the Employer

Date :

Name:

Designation:

(Note: Sponsorship certificate should be submitted in the same format as indicated in this application dulysigned by the Employer/ Head of the Sponsoring Organization and seal.)

No Objection Certificate (For admission to M.Tech / M Tech (Research) / PhD Programme (under External Registrant category) during the academic year 2024-25

The applicant (name) has been a permanent staff of this Institute/Organization from and has years of experience (teaching/R&D/industry) in this organization.

He/She is permitted to undergo Part-time study / Research for M.Tech (Research) /Ph.D (tick the relevant programme) in National Institute of Technology Karnataka, Surathkal while continuing regular employment in the Institute / organization and his / her NOC will not be withdrawn before the completion of the course / programme.

Official Seal

Station:

Signature of the Employer

Date :

Name:

Designation:

(Note: NOC should be submitted in the same format as indicated in this application duly signed by the Employer/ Head of the Sponsoring Organization and seal.)

No Objection Certificate (For admission to PhD Programme during the academic year 2024-25) (For Internal Registrant category only)

The applicant (name)..... has been a permanent / project staff of this Institute/Organization since.....

No Objection Certificate:

He / She is permitted to undergo Part-time study/research in National Institute of Technology Karnataka, Surathkal while continuing the employment at NITK and the candidate and his/her NOC will not be withdrawn before the completion of the course/programme.

Signature of the Principal Investigator of the Project

Name:

Designation:

Official Seal

Signature of the Director

Station:

Date :

No Objection Certificate (For admission to M.Tech (Research) Programme during the academic year 2024-25) (For Internal Registrant category only)

The applicant (name)..... has been a permanent / project staff of this Institute/Organization since......

No Objection Certificate:

He / She is permitted to undergo Part-time study/research in National Institute of Technology Karnataka, Surathkal while continuing the employment at NITK and the candidate and his/her NOC will not be withdrawn before the completion of the course/programme.

Signature of the Principal Investigator of the Project

Name:

Designation:

Official Seal

Signature of the Director

Station:

Date :

CERTIFICATE OF MEDICAL FITNESS

[To be obtained only from Gazetted Government Medical Officer / Medical Officer of a Government Undertaking. (Please note that Medical Certificate issued by Private Practitioners will not be accepted)]

Name (In Block Letters)	
Parent / Guardian Name	
Sex <u>Male / Female</u>	Blood Group (Optional)
Heightcm	Weight kg
Chest: Expcm	Insp cm
Heart	Lungs
Vision	Hearing
Hernia / Hydrocele / Varicocele/Piles, etc: .	
Any Other Disease Diagnosed in the Past:	
Allergies, if any	
Personal Marks of Identification:	
1.	
2.	
I do hereby certify that I have examined Sr	i/Kum/Smt,
A candidatefor	and whose signature is given below
and that I could not notice that he/she ha	s any disease, constitutional affection, bodily infirmity or

mental unsoundness.His/Her age according to his/her statement is

year and by appearance about years.

Signature of the Candidate

Place	Signature: of the Medical Officer
Date	Name:
Office Seal	Designation:
	Registration No

OBC-NCL Certificate Format

FORM OF CERTIFICATE TO BE PRODUCED BY OTHER BACKWARD CLASSES (NCL) APPLYING FOR ADMISSION TO CENTRALEDUCATIONAL INSTITUTIONS (CEIs), UNDER THE GOVERNMENT OF INDIA

This is to certify that Shri/Smt./Kum*		Son/
Daughter* of Shri/Smt.*	c	of Village/
Town*District/Division*		in the
State/Union Territory	belongs	to the
community that is recognized as	a backwar	d class under
Government of India**, Ministry of Social Justice and Empowe	erment's R	Resolution No.
dated**	*	
Shri/Smt./Kumand/or		
his/her family ordinarily reside(s) in the	Distri	ict/Division of
theState/Union Territory. This is als	o to certify	y that he/she
does NOT belong to the persons/sections (Creamy Layer) mentioned in (Column 3 of	f the Schedule
to the Government of India, Department of Personnel & Training O.M. No.	36012/22/9	93- Estt. (SCT)
dated 08/09/93 which is modified vide OM No. 36033/3/2004 Estt.(I	Res.) dated	d 09/03/2004,
further modified vide OM No. 36033/3/2004-Estt. (Res.) dated 14/10/200)8, again fur	rther modified
vide OM No.36036/2/2013-Estt (Res) dtd. 30/05/2014.		

District Magistrate / Deputy Commissioner / Any other Competent Authority

Dated:

Seal

Seal	
*	Please delete the word(s) which are not applicable.
**	As listed in the Annexure (for FORM-OBC-NCL)
***	The authority issuing the certificate needs to mention the details of Resolut

*** The authority issuing the certificate needs to mention the details of Resolution of Government of India, in which the caste of the candidate is mentioned as OBC.

NOTE:

- (a) The term 'Ordinarily resides' used here will have the same meaning as in Section 20 of the Representation of the People Act, 1950.
- (b) The authorities competent to issue Caste Certificates are indicated below:
 - (i) District Magistrate/ Additional Magistrate/ Collector/ Deputy Commissioner/ Additional Deputy Commissioner/ Deputy Collector/ Ist Class Stipendiary Magistrate/ Sub-Divisional magistrate/ Taluka Magistrate/ Executive Magistrate/ Extra Assistant Commissioner (not below the rank of Ist Class Stipendiary Magistrate).
 - (ii) Chief Presidency Magistrate / Additional Chief Presidency Magistrate / Presidency Magistrate.
 - (iii) Revenue Officer not below the rank of Tehsildar' and
 - (iv) Sub-Divisional Officer of the area where the candidate and/or his family resides

Annexure-I

OBC Undertaking

Declaration/undertaking - for OBC Candidates only

l,			son/da	aughter of Sh	nri			
resident	of	village/town/city			distri	ct		State
		hereby	declare	that	I	belong	to	the
				commun	ity which	is recognised as	a backwa	ard class

by the Government of India for the purpose of reservation in services as per orders contained in Department of Personnel and Training Office Memorandum No.36012/22/93- Estt. (SCT), dated 8/9/1993. It is also declared that I do not belong to persons/sections (Creamy Layer) mentioned in Column 3 of the Schedule to the above referred Office Memorandum, dated 8/9/1993, which is modified vide Department of Personnel and Training Office Memorandum No.36033/3/2004 Estt.(Res.) dated 9/3/2004.I also declare that the condition of status/annual income for creamy layer of my parents/guardian is within prescribed limits as on financial year ending on March 31, 2024

Place:

Signature of the Candidate*

Date:

*Declaration/ Undertaking not signed by Candidate will be rejected

FORM-GEN-EWS

INCOME & ASSET CERTIFICATE TO BE PRODUCED BY ECONOMICALLY WEAKER SECTIONS

Certificate No.

Date:

VALID FOR THE YEAR_____

I. 5 acres of agricultural land and above;

Recent Passport size

attested photograph

of the applicant

- II. Residential flat of 1000 sq. ft. and above;
- III. Residential plot of 100 sq. yards and above in notified municipalities;
- IV. Residential plot of 200 sq. yards and above in areas other than the notified municipalities.

2. Shri/Smt./Kumari_____belongs to the____caste which is not recognized as a Schedule Caste, Schedule Tribe and Other Backward Classes (Central List).

Signature with seal of Officer _____

Name _____

Designation _____

The income and assets of the families as mentioned would be required to be certified by an officer not below the rank of Tehsildar in the States/UTs.

* Note1: Income covered all sources i.e. salary, agricultural, business, profession, etc.

**** Note2:** The term **"Family"** for this purpose include the person, who seeks benefit of reservation, his/her parents are siblings below the age of 18 years as also his/her spouse and children below the age of 18 years.

***** Note3:** The property held by a **"Family"** in different locations or different places/cities have been clubbed while applying the land or property holding test to determine EWS status.

FORM-SC/ST

SC/ST Certificate Format

FORM OF CERTIFICATE TO BE PRODUCED BY SCHEDULED CASTES (SC) AND SCHEDULED **TRIBES (ST) CANDIDATES**

1. This is to certify that Shri/ Shirmati/ Kumari*_		son/daughter*			
of	of Village/Town*				
District/Division*of State/Union Territory*					
theScheduled Caste / Scheduled Tribe* under :-					
 * The Constitution (Scheduled Castes) Order, 1950 * The Constitution (Scheduled Tribes) Order, 1950 * The Constitution (Scheduled Castes) (Union Territories) * The Constitution (Scheduled Tribes) (Union Territories)) Order, 1951				
As amended by the Scheduled Castes and Scheduled Tribo 1966, the State of Himachal Pradesh Act, 1970, the North Amendment) Act, 1976 and the Scheduled Castes and Sc	n Eastern Areas (Reorganisation) Act, 1971, the	e Scheduled Castes and Scheduled Tribes Orders			
1976; * The Constitution (Dadara and Nagar Haveli) Scheduled * The Constitution (Dadara and Nagar Haveli) Scheduled * The Constitution (Pondicherry) Scheduled Castes Orde * The Constitution (Uttar Pradesh) Scheduled Tribes Orde * The Constitution (Goa, Daman and Diu) Scheduled Cast * The Constitution (Goa, Daman and Diu) Scheduled Cast * The Constitution (Goa, Daman and Diu) Scheduled Cast * The Constitution (Nagaland) Scheduled Tribes Order, 197 * The Constitution (Sikkim) Scheduled Tribes Order, 197 * The Constitution (Sikkim) Scheduled Tribes Order, 197 * The Constitution (Scheduled Castes) Order (Amendment * The Constitution (Scheduled Tribes) Order (Amendment * The Constitution (Scheduled Tribes) Order (Amendment * The Constitution (Scheduled Tribes) Order (Second Am	uled Tribes Order, 1959, as amended bythe Sche Iled Castes Order, 1962; d Tribes Order, 1962; ar, 1964; ler, 1967; stes Order, 1968; bes Order, 1968; 1970; 78; 78; 78; bes Order, 1989; nt) Act, 1990; t) Act, 1991; hendment) Act, 1991.	eduled Castes and Scheduled Tribes Order (Amendment) Ac			
2. [#] This certificate is issued on the basis of t	the Scheduled Castes / Scheduled Trib	es* Certificate issued to Shri /Shrimati*			
father/m	nother* of Shri /Shrimati /Kumari*	of Village/Town*			
	in District/Division*	of the State State/Union			
Territory*	who belong to the Caste / Tribe* where the content of the the test of	hich is recognised as a Scheduled Caste /			
Scheduled Tribe* in the State / Union Territory	/*iss	sued by thedated			
 3. Shri/ Shrimati/ Kumari *of		er* family ordinarily reside(s)** in Village/Town [:] Union Territory* of			
		Signature:			
		Designation			
Place:State/Union Ter	rritory*	(with seal of the Office			
Date:					
* Please delete the word(s) which are not applicable. # Applicable in the case of SC/ST Persons who have migrate MPORTANT NOTES The term "ordinarily reside(s)**" used here will have the sam		n of the People Act, 1950. Officers			

competent to issue Caste/Tribe certificates: District Magistrate / Additional District Magistrate / Collector / Deputy Commissioner / Additional Deputy Commissioner / Deputy Collector / Ist Class Stipendiary Magistrate / City Magistrate / Sub-Divisional Magistrate / Taluka Magistrate / Executive Magistrate / Extra Assistant Commissioner.

5. Administrator / Secretary to Administrator / Development Officer (Lakshdweep Island).

Chief Presidency Magistrate / Additional Chief Presidency Magistrate / Presidency Magistrate. 2.

Revenue Officers not below the rank of Tehsildar. 3. 4.

Sub-divisional Officer of the area where the candidate and/ or his family normally reside(s).

^{6.} Certificate issued by any other authority will be rejected.

CERTIFICATE OF MEDICAL FITNESS

Name (In Block Letters)			
Parent / Guardian Name			
Sex <u>Male / Female</u>	Blood Group (Optional)		
Heightcm	Weightkg		
Chest: Expcm	Inspcm		
Heart	Lungs		
Vision	Hearing		
Hernia / Hydrocele / Varicocele/ Piles, etc:			
Any Other Disease Diagnosed in the Past:			
Allergies, if any			
Personal Marks of Identification:			
1.			
2.			
I do hereby certify that I have examined Sri / Kum	/ Smt,		
Son / Daughter of	, who is an applicant for admission		

Signature of the Candidate

Place	Signature: of the Medical Officer
Date	Name:
Office Seal	Designation:
	Registration No