

राष्ट्रीय उन्नत विनिर्माण प्रौद्योगिकी संस्थान

(पूर्व नेशनल इंस्टीट्यूट ऑफ फाउंड्री एंड फोर्ज टेक्नोलॉजी) समविश्वविद्यालय (विशिष्ट श्रेणी) शिक्षा मंत्रालय के अंतर्गत, भारत सरकार हटिया, राँची - 834 003 (झारखण्ड)

National Institute of Advanced Manufacturing Technology

(Formerly National Institute of Foundry and Forge Technology)

Deemed to be University (Distinct Category) under Ministry of Education, Govt. of India

Hatia, Ranchi – 834003 (Jharkhand)

Semester/ Supplementary Examination Form

(Please Use Capital Letters to Fill in this form)

To,
Prof. - I/C (Examination)
NIAMT, Ranchi (Jharkhand)

Self- Attested Passport Size Photograph

	MT, Ranchi (Jharkhand))								
Sir,										
E	By giving the following	details, I requ	uest you to	please a	admit	me for	the up	comin	g exan	าination
of		(Ever	n/ Odd) Year_			and ki	ndly pr	ovide t	the adn	nit card.
Exa	mination Informatio	on:								
1.	Regular Exam	Suppl	lementary Ex	kam						
2.	Semester I	Semester II	S	emester	r III		Semes	ter IV		
	Semester V	Semester VI	S	emester	r VII		Semes	ter VII		
3.	B.Tech M.Tec	ch Ph	D AD	С	4.	Branch				
5.	Examination fee Amount		saction ID & f Transactior	1				D	D/MM/YYYY	,
Exar	minee Information:									
6.	Registration No.									
7. (Class Roll no.									
8. C	Candidate's Name:								_	
9. C	Candidate's Name in Hin	ıdi:							-	
10. F	ather's Name:									
11. N	Mother's Name:									
12. N	Mobile Number:									
13.D	Pate of Birth:								_	
140	Cotogony (LID/ODO/ST/SO	N								

15. Details of Appearing Subjects:

S. No.	Name of the Subject	Subject Code	Theory/Practical (Write T or P)		
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					

UNDERTAKING:

I hereby declare that I have reviewed the syllabus as well as the list of books needed for the examination
for which I am appearing. I will be held liable for any errors in the application form, as well as any inaccurate
or incorrect details. I would not seek any exemption for change in the time/ or day of the University
Examination.

Place:	
Date:	Signature of the Candidate

(To be filled by officials)
Certificate
o the best of my knowledge and belief, the courses mentioned by the candidate comply with the University rules and regulations, and the entries made by the candidate in the application are correct. He/she has my permission to ake the exam after receiving the admit card for the subjects for which he/she has applied.
Place:
Date:
Signature of ProfI/C (Examination)