



**Samarth Education Foundation's
IKON TECHNICAL INSTITUTE, SOLAPUR**

149/1A, Sudeep Complex, Ground Floor, Opp. Axis Bank,
Hotgi Road, Solapur.413003 (M.S.)



Reg.No.		ADMISSION FORM		Form No.
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(To be filled in CAPITAL letters only)

Name of the Course:	Course Code:	Year / Sem:
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Student's Name :

Father's/Guardian's Name :

Surname :

Gender: M / F Date of Birth: Blood Group:

Nationality: Religion:

Address:

 PIN:

District: State:

Moblie (Student) Moblie (Father/Guardian)

Academic Qualifications:

Exam	Name of School / College	Year of Passing	Board / University	Percentage
S.S.C.				
H.S.C.				
Diploma				

Declaration by the candidate:
 I hereby declare that all the details furnished are correct to the best of my knowledge
 If found incorrect institute may cancel my admission or may take necessary action.
 I agree to abide the rules and regulation of this institution.

Parent's / Guardian's Sign. Student's Sign

Place: Date: