

DEFENCE INSTITUTE OF ADVANCED TECHNOLOGY

(Deemed to be University under section 3 of UGC Act 1956) Girinagar, Pune – 411025 (INDIA)

APPLICATION FORM FOR ADMISSION TO MASTER OF TECHNOLOGY/ SCIENCE PROGRAMME JULY- 2025

1.	Name :	Phot	Photo			
	Date of Birth (DD/MM/YY					
	Address for Communication:		Permanent A			
	Pincode :		Pin code :			
	Phone No : E-Mail :		Mobile No : Fax No :			
	Details of University / Ins Degree Discipline	Unive	ersity/ College	Year	Average Marks/CGPA	Class
(a)	Degree Discipline	Unive	ersity/ College	Year	Marks/CGPA	Class
(a) (b)	Degree Discipline	Unive	ersity/ College	Year 	Marks/CGPA	Class
(a) (b) (c) (d)	Degree Discipline	Unive	ersity/ College	Year 	Marks/CGPA	Class
(a) (b) (c)	Degree Discipline	Unive	ersity/ College	Year 	Marks/CGPA	Class

5. Professional Experience (Technology/ Research/ Industrial) if any :								
Name of Opposite them	B oots with	Period		iod	National of Minds			
Name of Organization	Designation	Fro	m	То	Nature of Work			
6. Personal Information :								
Father's /	:	(f)	Ma	rital Statu	S :			
Husband's Name Father's / Husband's		()						
(b) Occupation	:	(g)	Ge	nder	: Male/ Female			
(c) Mother's Name	:	(h)		-	vsically challenged : Yes / No			
• •	:	` ,	•		sh the certificate to this effect)			
(d) Place of Birth(e) Mother Tongue	·	(i) (j)		tionality C ID	<u>:</u>			
(e) meaner renigue		(J)	,	U . D				
7. Proposal title of research	ch project work (Option	nal)						
(Please attach a small write	up next exceeding one pa	age)						
8. DECLARATION								
					a and other instructions and orm are correct to the best of			
my knowledge and belief a	nd I fulfill the eligibility	criteri	a. Ì	understar	nd that association (active or			
the rules and discipline of the	•	. II Se	iecie	a ioi adii	nission, I promise to abide by			
			-	•	election and assignment to a			
					to expel me from the Institute on false particulars furnished			
by me or I don't meet the pre	escribed eligibility criteria	a or m	y an	tecedents	prove that my continuance in f the Institute, which shall be			
final.	i agree mat i shall abit	a c by	u IC	ucolol011 0	T THE HISHIGIE, WHICH SHAIL DE			
Place :								
Date:				Signat	ure of Applicant			

9. List of enclosure				
(f)				
(g)				
(h)				
(i)				
(j)				
_	(g) (h) (i)			

10. Recommendation of the Commanding Officer of the Unit:

Signature of The Commanding Officer

11. Recommendation of the Head Quarter:

Authorised Signatory