



# 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- 2026**

Name of M.Tech/ M.Sc Programme applied for: \_\_\_\_\_

Specialization: \_\_\_\_\_

|                                                                            |               |                           |                            |             |                           |              |
|----------------------------------------------------------------------------|---------------|---------------------------|----------------------------|-------------|---------------------------|--------------|
| <b>1. Name</b> : _____                                                     |               |                           |                            |             | <b>Photo</b>              |              |
| <b>Date of Birth (DD/MM/YY)</b> : _____ <b>Age</b> : _____                 |               |                           |                            |             |                           |              |
| <b>Address for Communication:</b>                                          |               | <b>Permanent Address:</b> |                            |             |                           |              |
| _____                                                                      |               | _____                     |                            |             |                           |              |
| _____                                                                      |               | _____                     |                            |             |                           |              |
| _____                                                                      |               | _____                     |                            |             |                           |              |
| <b>Pincode</b> : _____                                                     |               | <b>Pin code</b> : _____   |                            |             |                           |              |
| <b>Phone No</b> : _____                                                    |               | <b>Mobile No</b> : _____  |                            |             |                           |              |
| <b>E-Mail</b> : _____                                                      |               | <b>Fax No</b> : _____     |                            |             |                           |              |
| <b>2. Type of Registration:</b> Sponsored / Self Sponsored                 |               |                           |                            |             |                           |              |
| <b>3. Details of University / Institution Studied (SSC, HSC and above)</b> |               |                           |                            |             |                           |              |
|                                                                            | <b>Degree</b> | <b>Discipline</b>         | <b>University/ College</b> | <b>Year</b> | <b>Average Marks/CGPA</b> | <b>Class</b> |
| (a)                                                                        | _____         | _____                     | _____                      | _____       | _____                     | _____        |
| (b)                                                                        | _____         | _____                     | _____                      | _____       | _____                     | _____        |
| (c)                                                                        | _____         | _____                     | _____                      | _____       | _____                     | _____        |
| (d)                                                                        | _____         | _____                     | _____                      | _____       | _____                     | _____        |
| (e)                                                                        | _____         | _____                     | _____                      | _____       | _____                     | _____        |
| <b>4. Additional Qualifying Examination (if any):</b>                      |               |                           |                            |             |                           |              |
| <b>A</b> NET/GATE/JAM Score: _____ Valid up to : _____                     |               |                           |                            |             |                           |              |
| <b>B</b> _____                                                             |               |                           |                            |             |                           |              |
| <b>C</b> _____                                                             |               |                           |                            |             |                           |              |

**5. Professional Experience (Technology/ Research/ Industrial) if any :**

| Name of Organization | Designation | Period |       | Nature of Work |
|----------------------|-------------|--------|-------|----------------|
|                      |             | From   | To    |                |
| _____                | _____       | _____  | _____ | _____          |
| _____                | _____       | _____  | _____ | _____          |
| _____                | _____       | _____  | _____ | _____          |
| _____                | _____       | _____  | _____ | _____          |
| _____                | _____       | _____  | _____ | _____          |

**6. Personal Information :**

- (a) Father's / Husband's Name : \_\_\_\_\_ (g) Marital Status : \_\_\_\_\_
- (b) Father's / Husband's Occupation : \_\_\_\_\_ (h) Gender : \_\_\_\_\_
- (c) Mother's Name : \_\_\_\_\_ (i) Whether Physically challenged : **Yes / No**  
(If yes, furnish the certificate to this effect)
- (d) Place of Birth : \_\_\_\_\_ (j) Nationality : \_\_\_\_\_
- (e) Mother Tongue : \_\_\_\_\_ (k) Academic Bank Credit (ABC) ID : \_\_\_\_\_
- (f) Mobile No. (Parents/ Spouse): \_\_\_\_\_

**7. Proposal title of research project work (Optional)**

(Please attach a small write up next exceeding one page)

**8. DECLARATION**

I hereby declare that I have carefully read the eligibility criteria and other instructions and particulars supplied to me and that the entries made in the application form are correct to the best of my knowledge and belief and I fulfill the eligibility criteria. I understand that association (active or passive) with any unlawful organization is forbidden. If selected for admission, I promise to abide by the rules and discipline of the Institute.

I note that the decision of the Institute is final in regard to selection and assignment to a particular department and field of study. The Institute shall have the right to expel me from the Institute at any time after my admission, provided it is satisfied that I was admitted on false particulars furnished by me or I don't meet the prescribed eligibility criteria or my antecedents prove that my continuance in the Institute is not desirable. I agree that I shall abide by the decision of the Institute, which shall be final.

Place : \_\_\_\_\_

Date : \_\_\_\_\_

Signature of Applicant

| 9. List of enclosure |     |
|----------------------|-----|
| (a)                  | (f) |
| (b)                  | (g) |
| (c)                  | (h) |
| (d)                  | (i) |
| (e)                  | (j) |

10. Recommendation of Head of the Institute:

Signature of The Head of the Sponsoring Institute