

(An AUTONOMOUS Institution | Affiliated to Anna University, Chennai)





Kondampatti (P.O), Vadasithur (Via), Kinathukadavu, Coimbatore - 641 202. Tel: 04259 200300 Cell: 73736 17171, 97153 17171 Fax: 04259 200305 E-mail: sece@sece.ac.in Web: www.sece.ac.in

CHECKLIST

Name of th	ame of the Student:Da					
Year and B	ranch : B.E. / B.Tech./ M.E	./ Lateral Entry			_	
Put 🗆 mai	k Hostel	College Bus	Out B	us		
	<u> </u>	1				
	llowing Original Document to be					
Sl.No.	Particul	ars ————————————————————————————————————	3	ubmitted	Not Submitted	
1.	College Application Form					
2.	Annexure I					
3.	Annexure II					
4.	Annexure III					
5.	10 th Mark sheet					
6.	+1 Mark Sheet					
7.	+2 Mark sheet					
8.	For Lateral Entry only					
	a. Consolidated Mark Sheb. Provisional Certificate	eet				
0						
9. 10.	Community Certificate Migration Certificate (If Studie	d in other State)				
11.	Transfer Certificate	u iii otilei Statej				
12.	Conduct Certificate					
13.	Xerox copies of the above Ce	ertificates (Fach 3 Nos	:) +			
	Aadhar card	runcates (Lacii 5 Nos	5., 1			
14.	Physical fitness Certificate					
15.	Photo Passport size - Student (· · · · · · · · · · · · · · · · · · ·				
16.	Parents Photo (Father Photo 1	No. Mother Photo 1 N	o.)			
17.	Transport Application Form					
18.	Hostel Application Form					
	The following documents ar	e applicable for Gove	nment Qu	iota student	ts only	
19.	Allotment order					
20.	First Graduate Certificate					
21.	First Graduate Concession - Joi	nt Declaration Form				
22.	Income Certificate					
	The following DD is app	olicable for Manageme	ent Quota	students on	ly	
	DD - Rs. 450/- (For Manageme	•				
23.	favour of "Association of Ma	•	tore			
	Anna University Affiliated Col	leges" payable at		/ - - 55		
	Coimbatore			(For Office	ce use only)	



(Approved by AICTE, New Delhi & Affiliated to Anna University, Chennai)
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Affix Passport Photo

APPLICATION FORM

PERSONAL INFORMATION					
Student Name					
					Male Female
Preferred Course				Quota:	
				G.Q	M.Q
Year: I Year B.E / B.Tech	Lateral Entry	for G.O. only	I Year M.E		Others
Counselling Application No. Coun Overa	8 5 2	W.F8 55 5			
Courselling Application No. Cours. Overa	II Karik Coun.communi	ty Karik G.Q. 7	принсасноги по		Whather First Graduate?
Permanent Address (Door No, Street, Taluk,	Dist, Pincode)	Ter	mporary Addre	ess (Door No, S	treet, Taluk, Dist, Pincode)
	Dincodo				Dincodo
Date of Rirth Community Cas		ate)	Religion		
Date of Birth Community Cas	to Hame (As in Certific		religion		readificity
Self Mohile No. Blood (Group Date of Ac	dmission	Mother Tongu	ue	Aadhar Number
Sell Flobile No.					
Self Whatsapp No. Self Em	ail ID		Nominee 1	for Accident	Insurance Covered by SECE
Require College Transport If Yes, Bo	arding Point	Require Host	el Accommod	lation If Yes	5
Yes No		Yes	No	1	/eg Non-Veg
Siblings studying in SECE If Yes, Name	e of the Sibling	Roll No.	De	epartment	Year of Admission
Yes No					
Career Option: Placement	Govt. Job Higher St	tudies : ME	МВА	Entreprer	neurship Marriage
PARENTAL INFORMATION		1			
Name of the Father					Qualification
Occupation (Recent) Annu	Jai Income	Work Into: (Govt/F	Private/Others & C	Company Name) Designation
Eather Mehile No	Father Empil ID			F-11 WI1-	L L
Father Mobile No.	rather chair 10			ratner whats	варр но.
Name of the Mother				Qualific	ration
Name of the Mother				Qualific	Cacion
Occupation (Recent) Ann	nual Income	Work Info: (Govt/F	Private/Others & (Company Name) Designation
Preferred Course Quota: G.Q M.Q Year: I Year B.E / B.Tech Lateral Entry (Applicable for G.Q only) Counselling Application No. Coun.Overall Rank Coun.Community Rank G.Q. Application No. Counselling Application No. Coun.Overall Rank Coun.Community Rank G.Q. Application No. Permanent Address (Door No, Street, Taluk, Dist, Pincode) Pincode Pincode Pincode Pincode Pincode Pincode Self Mobile No. Blood Group Date of Admission Mother Tongue Aadhar Number Self Whatsapp No. Self Email ID Nominee for Accident InsuranceCoveredby SECE Require College Transport If Yes, Boarding Point Require Hostel Accommodation Yes No Yes No Veg Non-Veg Siblings studying in SECE If Yes, Name of the Sibling Roll No. Department Year of Admission Annual Income Work Info: (Govt/Private/Others & Company Name) Work Info: (Govt/Private/Others & Company Name) Qualification Name of the Mother Qualification Qualification					
Mother Mobile No.	Mother Email ID	3		Mother What	sapp No.
Name of the Guardian	5 4 10				Qualification
Occupation (Recent) Ann	ual Income	Work Info: (Govt/F	Private/Others & 0	Company Name) Designation
Guardian Mobile No. To send SMS	Guardian Email ID. To s	send Email		Guardian Wh	atsapp No.

SCHOOL DETAILS		
10 th Std		
School Name:	Month & year of Passing:	
Medium of study:	Marks Obtained : Out of(Total marks):	
School Address	Reg no:	
	Certificate no:	
Pincode: District:		
School Name: Medium of study: School Name: Pincode: District: 11 th Std School Name: Medium of Study: School Name: Medium of Study: School Name: Medium of Study: School Address Reg no: Certificate no: Pincode: District: Certificate no: Pincode: District: Month & year of Passing: Certificate no: Pincode: District: Month & year of Passing: Certificate no: Pincode: District: Month & year of Passing: Certificate no: Pincode: District: School Address Reg no: Certificate no: Pincode: District: Subject / Semester Marks Obtained : Out of (Total marks): Subject Out of Mathematics / 100 Physics / 1,100 Physics / 1,100 I / Chemistry / 1,100 I / Chemistry / 1,100 Total I / J Subject Out of Mathematics / 1,200 Physics / 1,100 Advertisement Newspaper Website Finends & Relatives Education Fairs Tv / Poeters Others DECLARATION BY CANDIDATE AND PARENT / GUARDIAN 1 hereby declare that the information furnished by me here is found to be faise or distorted, or if any information is found to be suppressed to secure admission, I understand that, I will be denied admission at any stage of my study and if already admitted, my admission/Degree acquired is lable to be Ecancalied without any consideration. 1 Formission abdied by the rules and requilations of the College, if I am admitted. Signature of the Student		
School Name:	Month & year of Passing:	
Medium of study:	1arks Obtained : Out of(Total marks):	
School Address	Reg no:	
Pincode: District:	Certificate no:	
New York of the Control of the Contr		
Security Control (Control Control Cont	Month & year of Passing	
	Out of(Total marks):	
School Address	Reg no:	
	Certificate no:	
Pincode: District:		
SUBJECT MARKS IN 12 TH / DIPLOMA	CUT OFF MARKS	
60.35 - 00 - 0.4 - 1000 - 0.000 0.00	The state of the s	
	/ Mathematics /100	
	/ Physics / 100	
	/ Chemistry /100	
	/ Total out of: /200	
	/	
	/	
	7	
 I hereby declare that the information furnished in this a 	application form is complete, accurate, true and correct to the best of my	
	alse or distorted, or if any information is found to be suppressed to secure	
	경기 선생님이 발생하게 되었습니다. 그렇게 보고 없는 네트를 보고 있다면 되었습니다. 그렇게 그렇게 되었습니다. 그렇게 그렇게 그렇게 되었습니다. 그렇게 그렇게 그렇게 그렇게 그렇게 그렇게 그렇게 그렇게 그	
I Promise to abide by the rules and regulations of the Coll		
Signature of the Parent/Guardian Date:	Signature of the Student	

Read the Application form carefully before filling it
 2. Use blue / black Ball Point only
 3. Write your name in capital letters
 4. Fill up all the columns
 5. Affix your recent passport photo, do not staple the photo.
 6.Certificates in the attached checklist is to be submitted along with application

ANNEXURE 1 AFFIDAVIT BY THE STUDENT

Ι,	(full
name	of student with admission / registration / enrolment number), S/o - D/o Mr. / Mrs. / Ms.
1)	having been admitted to Sri Eshwar College of Engineering, Coimbatore have received and download a copy of UGC regulations on curbing the menace of Ragging in Higher Educational Institutions, 2009 (hereinafter called the "Regulations") carefully read and fully understood the provisions contained in the said Regulations.
2)	I have, in particular, perused clause 3 of the Regulations and am aware as to what constitutes ragging.
3)	I have also, in particular, perused clause 7 and clause 9.1 of the Regulation and am fully aware of the penal and administrative action that is liable to be taken against me in case I am found guilty of or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging.
4)	I hereby solemnly aver and undertake that a) I will not indulge in any behavior or act that may be constituted as ragging under clause 3 of the Regulations.
	b) I will not participate in or abet or propagate through any act of commission or omission that may be constituted as ragging under clause 3 of the Regulations.
5)	I hereby affirm that, if found guilty of ragging, I am liable for punishment according to clause 9.1 of the Regulations, without prejudice to any other criminal action that may be taken against me under any penal law or any law for the time being in force.
6)	I hereby declare that I have not been expelled or debarred from admission in any institution in the country on account of being found guilty of, abetting or being part of a conspiracy to promote, ragging; and further affirm that, in case the declaration is found to be untrue, I am aware that my admission is liable to be cancelled.
Decla	red thisday ofmonth ofyear
Signa	ture of Deponent:
Name	VERIFICATION
affidav	d that the contents of this affidavit are true to the best of my knowledge and no part of the it is false and nothing has been concealed or misstated therein. Verified at (place)on this (day)of (month)(year)
Signa	ture of deponent
Solem	nly affirmed and signed in my presence of this the (day)of month(year)after reading the contents of this affidavit.

ANNEXURE 2 AFFIDAVIT BY PARENT / GUARDIAN

I <u>,</u>	Mr. / Mrs. / Ms. (full
name of parent / guardian) father / mother / guardian of	
(full name of student with admission / registration / enrolment numer),	
 having been admitted to Sri Eshwar College of Engineering received a copy of the UGC regulations on curbing the men Higher Educational Institutions, 2009 (hereinafter called the "Re and fully understood the provisions contained in the said Regulation 	nace of Ragging in egulations") carefully read
I have, in particular, perused clause 3 of the Regulations and constitutes ragging.	am aware as to what
3) I have also, in particular, perused clause 7 and clause 9.1 of the aware of the penal and administrative action that is liable to be t case he/she is found guilty of or abetting ragging, actively or pas- conspiracy to promote ragging.	aken against my ward in
4) I hereby solemnly aver and undertake that	
 a) My ward will not indulge in any behavior or act that may be con clause 3 of the Regulations. 	stituted as ragging under
b) My ward will not participate in or abet or propagate through a omission that may be constituted as ragging under clause 3 of R	
5) I hereby affirm that, if found guilty of ragging, my ward is liable for clause 9.1 of the Regulations, without prejudice to any other crir taken against my ward under any penal law or any law for the time be	minal action that may be
6) I hereby declare that my ward has not been expelled or debarre institution in the country on account of being found guilty of, ab- conspiracy to promote, ragging; and further affirm that, in case the untrue, I am aware that admission of my ward is liable to be cancelled.	etting or being part of a declaration is found to be
Declared thisday ofmonth ofye	ear
Signature of Deponent: Name : Address :	
Telephone / Mobile No : VERIFICATION	
Verified that the contents of this affidavit are true to the best of my know affidavit is false and nothing has been concealed or misstated thereon this the(day) of(month) and	ein. Verified at (place)
Signature of deponent Solemnly affirmed and signed in my presence of this the (day)o	of month(year)



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Annexure III **DECLARATION FORM**

I hereby solemnly and sincerely affirm:

- 1. That the statements made and information furnished in my son's / daughter's / ward's application as also in all the enclosures thereto submitted by him / her are true. Should it however, be found that any information furnished therein is untrue in material particulars. I realise that I am liable to criminal prosecution and I also agree to the forfeiture of the seat in the institution.
- 2. That I have read the eligibility regulations and am satisfied that my ward is for admission to the course, as per University, Government norms.
- 3. That my son / daughter /ward would confirm strictly to all the rules and regulations in for or which may be introduced in the institution hereafter and that I realise that breach of discipline and rules on my son's/daughter's/ ward's part would entail summarily forfeiture of his /her seat in the institution.
- 4. That I am aware that if my son / daughter / ward does not put in a minimum of 75 percent attendance in each course during the semester, my son/daughter/ward will not be eligible to write the semester examinations in that course and will have to repeat the course as and when offered next.
- 5. That I am aware that the curriculum for the various courses is liable to be revised or modified and that my son/daughter/ ward will follow the syllabi for the various courses in force at the time of his her admission and that any revision or modification made in the syllabi during the course of his / her study in the institution will be binding on him / her.
- 6. That in case of my son's / daughter's / ward's progress in studies is uniformly poor in the institution his/ her studies are liable to be terminated by the issue of Transfer Certificate.
- 7. That in case my son / daughter / ward becomes a scholarship holder or comes to enjoy educational concessions like half fee or full fee etc., and does not show special progress, the scholarships or educational concessions are liable to be cancelled and that if my son's / daughter's/ ward's conduct and character are not good these will be cancelled summarily.
- 8. That my son / daughter / ward is aware that breach of discipline and rules or bad conduct in extra curricular activities will also entail summarily forfeiture of seat in the institution, in addition to such other proceedings that may be taken against him / her.
- 9. That I am aware that if my son / daughter / ward is admitted into the hostel he / she will strictly abide by the rules and regulations in force in the hostel and that any breach of discipline or rules or any unruly conduct or undesirable activities will be summarily dealt with by the forfeiture of seat both in the hostel and the institution in addition to such other proceedings that may be taken against him / her.
- 10. That I and my son / daughter / ward are aware that the Sri Eshwar College of Engineering is an Autonomous College framing its own courses, curricula and assessment systems. We agree that my son / daughter / ward will be bound by and abide by such rules and regulations relating to curricula, examination assessment and other academic matters as may be framed from time under the autonomous functioning of the Sri Eshwar College of Engineering.
- 11. That we shall not seek for transfer to any other Engineering College during, the 3years/4 years tenure of study of my son / daughter / ward under any circumstances.

(Signature of the Candidate)

(Signature of the Parent)

Name of the Candidate (in BLOCK LETTERS)

(With Name and Address)



Sri Eshwar College of Engineering (An AUTONOMOUS Institution | Affiliated to Anna University, Chennai)





PHYSICAL FITNESS CERTIFICATE

1	do	hereby	certify	that	1	have	exa	amined
Thiru / Selvi_				_a candid	late for a	dmis		
sion to the_							Prog	ramme
and confirm								bodily
infirmity			-					•
,	1 ()-							
(*) I do not c	onsider this	s as a disquali	fication for	undergoi	ng the co	urses in Eng	jineerin	g.
His / H	ter age acc	cording to his	/ her own	stateme	nt is			_years
and by appe								
vaccination.				•				
Personal ma	arks of ide	entification						
1.								
2.								
۷.								
Blood Group	շ & Rh Tyբ	oe:						
General Exa	mination:	Height	cms;	Wei	aht	kgs.		
		Pulse						
		Resp. Rate_				_	Cr	ns
		• -		, .		, , ,		
Date :			S	ionature o	of Medica	l Officer with	n Seal	
Place :			3	igriatare (or riculcu	i Officer wid	i ocui	
. 1000 1								
(*) Any defec	t or other c	disabilities whe	en present :	should be	noted in	detail.		



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Affix your recent Passport size photo

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TRANSPORT APPLICATION

Name of th	na Studant	
Name of the	ic olddciil	•

Roll No (To be filled later) :

Branch and Year of Study :

Address for Communication

(with contact No.)

Parent /Guardian Contact No. :

Boarding Place (Bus Stop)

Bus Route (Refer Website for Details) :

Bus No. (Refer Website for Details) :

Transport Fee per annum :

Transport Fee Status : YES / NO

Date of Issue of Bus Identity Card :

Other Information :

Signature of the Student

Signature of the Parent

Signature of the Class Advisor

Signature of the Cashier

Signature of the Transport Officer





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E-mail: sece@sece.ac.in Web: www.sece.ac.in



Room No.:

	HOSTEL AF	PPLICATION		M.Q	G.Q
Name			Sex :	Male / Fe	
Roll No. : Semest	er	Branch :	Γ		
Date of Birth :		Blood Group :		Dh	. 4 -
State				Pho	OIO
Student Mobile No. :	Student Wh	atsapp No. :			
Name and occupation of Father	:				
Father Mobile No. :		Father Whatsapp No.	:		
Address with Pincode:					
Name and occupation of Mother	:				
Mother Mobile No. :		Mother Whatsapp No.	:		
Address with Pincode:					
Name, Occupation and address o 1.	f local Guardian / \ 2.	/isitors if any :	3.		
Guardian Mobile No. :		Guardian Whatsapp N	o. :		
I hereby declare th		<u>ration</u> e rules and regulations	of the Hos	tel.	
Date :	Signature of	the Parent	Signatur	e of the S	Student

FIRST GRADUATE CONCESSION -JOINT DECLARATION FORM

I hereby declare the following details of my family members and their education qualifications to avail the tuition fee waiver for my studies in professional courses under the scheme of waiver of tuition fees to the students from the family where there are no graduates.

No		Relationship Father / Mother / Brother / Sister / Grand Father / Grand Mother	Age	Educational Qualification	Whether Degree holder	
(1)	(2)	(3)	(4)	(5)	(6)	
		Applicant				
		Father				
		Mother				
		Father's Father				
		Father's Mother				
		Mother's Father				
		Mother's Mother				
		Brother / Sister				
		Brother / Sister				

I hereby solemnly and sincerely affirm that I am the first person from my family to claim the waiver of Tuition Fee for entire Professional Course of study and there is no graduate in my family so far. The particulars furnished above are true. Should it, however, be found that any information furnished therein is false in material particulars on verification at a large stage, I am liable for criminal prosecution and I also agree to return the amount equal to three times the tuition fee waiver availed by me.

Date :	
Place :	SIGNATURE OF THE CANDIDATE

I solemnly and sincerely affirm that I am fully aware of the above declaration and the particulars furnished in the declaration are correct. I am liable for the criminal action / recovery of amount equal to three times of the fees waived, for incorrect particulars furnished.

Date	•		

Dato:

Place : SIGNATURE OF THE PARENT / GUARDIAN