



BITS, Pilani – Dubai

APPLICATION FORM FOR ADMISSION 2010 - 2011

PART - B

1. Name of the Applicant _____

2. Father's Name _____ Occupation _____

Father's e-mail _____ Father's Mob No _____

3. Mother's Name _____ Occupation _____

Mother's e-mail _____ Mother's Mob No _____

4. Annual Income of the Family _____

5. a) Is any of your Parent a resident of UAE / GCC Country? Yes No

b) If Yes, please give the following details: _____
Full Postal Address & Employment details _____

Phone: _____ Mobile: _____ Fax: _____

6. Emergency Contact Phone Number: _____ E-mail: _____

7. Whether Student Visa Required Yes No

8. Whether Hostel Accommodation Required Yes No

9. Whether Transportation Required Yes No

10. If any member of your family is currently studying at BITS, Pilani – Dubai, give details:

Name of the Student	Relation	Programme of Study

Declaration: I have gone through the Admission Bulletin & I shall abide by all the conditions laid therein. I further hereby declare that all the information given and statements made in this application and also its accompanying attachments and enclosures are true to the best of my knowledge. I agree to the condition that if any information or statement is found to be incorrect, my admission will automatically be cancelled.

Date: _____ Applicant's Sign: _____ Parent / Guardian's Sign: _____

FOR OFFICE USE

Application Fee Paid Yes No Rt. No. _____ Dt. _____

Application Number Allotted:

Admission to B.E. (Hons.) _____

Programme Fee Paid Yes No Rt. No. _____ Dt. _____

Date: _____ Dean's Sign: _____ Director's Sign: _____