



भारतीय विज्ञान शिक्षा एवं अनुसंधान संस्थान भोपाल  
Indian Institute of Science Education and Research Bhopal

Office of Academic Affairs

IAT Application No. ....

**Personal Information**

1. Roll No. : \_\_\_\_\_ Full Name : \_\_\_\_\_
2. Date of Birth : \_\_\_\_\_ Place of Birth : \_\_\_\_\_
3. Aadhar No. : |\_|\_|\_|\_|\_| - |\_|\_|\_|\_|\_| - |\_|\_|\_|\_|\_|
4. APAAR ID/ ABC ID, if available : |\_|\_|\_|\_|\_| - |\_|\_|\_|\_|\_| - |\_|\_|\_|\_|\_|
5. National Academic Depository (NAD) ID No., if available : \_\_\_\_\_
6. Religion : Hinduism |\_|\_| Islam |\_|\_| Sikhism |\_|\_| Christianity |\_|\_| Jainism |\_|\_|  
Zoroastrianism (Parsi) |\_|\_| Buddhism |\_|\_| Other, please specify \_\_\_\_\_
7. Category : General |\_|\_| OBC-Creamy Layer |\_|\_| OBC-Non Creamy |\_|\_| SC |\_|\_| ST |\_|\_|
8. Kashmiri Migrant |\_|\_| Kashmiri Pandit/ Kashmiri Hindu Families (non-migrants) |\_|\_| PD |\_|\_|
9. Mobile No.: \_\_\_\_\_ 8. IISER E-mail ID: \_\_\_\_\_
10. Alternate E-mail ID: \_\_\_\_\_

**Details of Parents**

**Father's Details**

11. Name: \_\_\_\_\_
12. Address: \_\_\_\_\_  
District: \_\_\_\_\_ State: \_\_\_\_\_ Pin: \_\_\_\_\_
13. Mobile No.: \_\_\_\_\_ 14. E-mail ID\*: \_\_\_\_\_
15. Occupation: \_\_\_\_\_ 16. Annual Income: \_\_\_\_\_

**Mother's Details**

17. Name: \_\_\_\_\_
18. Address: \_\_\_\_\_  
District: \_\_\_\_\_ State: \_\_\_\_\_ Pin: \_\_\_\_\_
19. Mobile No.: \_\_\_\_\_ 20. E-mail ID: \_\_\_\_\_
21. Occupation: \_\_\_\_\_ 22. Annual Income: \_\_\_\_\_

Student's Signature

Parent's Signature

\*Grade Sheets/Transcript will be sent to this E-mail ID.

**Details of Legal Guardian, if applicable:**

23. Name: \_\_\_\_\_

24. Address: \_\_\_\_\_

District: \_\_\_\_\_ State: \_\_\_\_\_ Pin: \_\_\_\_\_

25. Mobile No. : \_\_\_\_\_ 26. E-mail: \_\_\_\_\_

**Educational Qualification:**

Degree	Board University	Passing Year	% of Marks/ CGPA/CPI
High School			
Higher Secondary			

**Declaration by the student**

I, \_\_\_\_\_ Ward/o \_\_\_\_\_ hereby declare that,

- i. The information provided by me in online application form/admission form/medical form and this form is same and true to the best of my knowledge and based on records.
- ii. I understand that a false information provided by me in the application form or any of the supporting documents will lead to the forfeiture of my candidature at any stage of the admission process, or thereafter.

**Declaration by the Parent**

I, \_\_\_\_\_ Parent/o \_\_\_\_\_ hereby declare that,

- i. The information provided by my ward in online application form/admission form/medical form and this form is same and true to the best of my knowledge and based on records.
- ii. I understand that a false information provided by my ward in the application form or any of the supporting documents will lead to the forfeiture of his/her candidature at any stage of the admission process, or thereafter.
- iii. I undertake to inform the Institute, about any changes in information submitted by me/my ward, in the Application Form and any other documents, including change in addresses and phone nos., e-mail IDs, from time to time.

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

Place : Bhopal

Student's Signature

Parent's Signature