

Satyam Institute of Management and Technology
Opp. Allowal Gate Jalandhar Road, Nakodar

Admission Form for Session: 2026-27

Admission Form to be Filled by the Applicant

Paste Recent
Passport Size
Photograph

1. Course Applied for : _____
2. Branch Applied for : _____
3. Semester : _____
4. Candidate's Name (Please fill name in Capital letters)

First Name																			
Middle Name																			
Last Name																			
5. Father's Name (Please fill name in Capital letters)

First Name																			
Middle Name																			
Last Name																			
6. Mother's Name (Please fill name in Capital letters)

First Name																			
Middle Name																			
Last Name																			
7. Gender : Male Female Transgender
8. Date of Birth (DD/MM/YYYY) :
9. Blood Group : _____
10. Marital Status : _____
11. Aadhar Card No. : _____
12. Category : _____ Sub Category : _____ Caste : _____
13. Is eligible for Post Matric Scholarship Scheme : Yes No
14. Do you wish to opt of Tuition Fee Waiver Scheme (For 85% Quota only) : Yes No
15. Annual Family Income : _____
16. Seat Claiming under : 85% (Punjab Quota) / 15% (Other State Quota)
17. Permanent Address : _____
 City: _____ District: _____ State: _____ Country: _____
 Mobile Number _____ Parent's Phone No. _____

18. Correspondence Address : _____

City: _____ District: _____ State: _____ Country: _____

19. Email ID : _____

20. Academic Details:

Examination	Qual. Exam Roll No.	Year of Passing	Name of Board /University	Name of School /College	Maximum Marks	Obtained Marks
Matric						
10+2						
Diploma						
UG Degree						

Declaration

I solemnly declare that I have filled the application form in my own handwriting. I also declare that I have never been convicted by any court of Law or disqualified by any Board/University. The above given information is true to the best of my knowledge and believe. If the above given information is found to be incorrect at any stage, then disciplinary action may be taken against me and my candidature may be cancelled. I shall not claim any compensation in such case.

Place: _____

Date: _____

(Signature of Guardian)

(Signature of Candidate)

Verification

Certified that the particulars given above by the candidate are verified by me with original documents and found correct.

Place: _____

Date: _____

(Signature of the Admission Incharge)

Note: At the time of admission the College will verify the details filled by the students in the Application form with their original documents and keep the following documents in their office record:-

1. Attested copy of Matriculation Certificate
2. Attested copy of All DMCs / Degree of Qualifying Examination
3. Migration Certificate in Original related to qualifying exam (to be kept by College in their record)
4. 4 copies of Passport Size Photos
5. Attested copy of Residence Certificate
6. Attested copy of Reserved Category Certificate (as applicable)
7. Income Affidavit in original (if admitted under TFW Scheme / PMS Scheme)
8. Gap Affidavit in original (if applicable)
9. Medical Fitness Certificate
10. Any other certificate (if applicable)