

NATIONAL INSTITUTE OF TECHNOLOGY TIRUCHIRAPPALLI - 15

OFFICE OF THE ACADEMIC

Information for Provisional Admission to M.Sc. Programmes under CCMN 2020 Process

The candidates who got seat allotment under CCMN 2020 process (in Round-1, Round-2 and Round-3) for provisional admission into M.Sc. programmes of National Institute of Technology, Tiruchirappalli for the academic year 2020-21 are requested to follow the guidelines as given below:

1. Candidate Registration Schedule for Provisional Admission

All the candidates must Register and Enter their personal data using the following link (use only Mozilla Firefox browser):

https://misreg.nitt.edu/STUDENTREG/

The link will be active between 11.08.2020 (from 10 am onwards) to 19.08.2020 (upto 11.59 am)

(i) Please follow the instructions as given in the above web link carefully and fill the required details correctly.

(ii) Please make a note of the generated 8-digit Temporary Roll Number and keep a copy for future reference.

2. Original Certificates/Documents to be uploaded by the candidate in the portal:

- i. Online Document Verification Certificate (ODVC) downloaded from the CCMN 2020 portal in students login and it should be self attested.
- ii. Provisional Seat Allotment Letter (PSAL) generated from CCMN 2020 website during **3rd Round** and it should be self attested.
- iii. JAM 2020 score card
- iv. Original Birth certificate (in English or Hindi) as proof of date of birth
- v. Original Class X Board Certificate
- vi. Original Class XII certificate
- vii. Original Statement of Grades/Marks obtained in the qualifying Examination (preferably Consolidated Grade/Mark Sheet with all subjects mentioned in it)
- viii. Original Degree / Provisional Certificate
- ix. Original Course Completion Certificate for result awaiting candidates
- x. Original Transfer Certificate issued from the institute last studied/attended
- xi. Original Migration Certificate
- xii. Original Certificate of Category (EWS / OBC / SC / ST), if applicable, issued by the competent authority as per the prescribed format given in Annexure-II (EWS/OBC category certificate must be issued on or after 01.04.2020)
- xiii. OBC undertaking form for OBC candidates as given in Annexure-II (filled and signed by the candidate)

- xiv. Original Certificate for Persons with Disabilities (PwD) issued by Medical Board notified under PwD Act (format given in Annexure-II)
- xv. Computer generated institute balance fee paid receipt with self attested
- xvi. Late submission undertaking form (format given in Annexure-III), if necessary

All the above certificates/documents must be uploaded in a single zip folder in the student registration portal

Note:

- In case, if the candidate is not able to get the certificate listed above in Sl. No. (viii), (ix), (x) and (xi) at the time of admission due to result awaiting/late issuance of certificate etc., he/she has to upload the Late Submission undertaking form as per the prescribed format given in Annexure-III
- If any certificate is in languages other than Hindi or English, true copy of the same in English version is to be uploaded.

For EWS/OBC candidates:

- Case I: Those candidates who are not able to obtain the EWS/OBC certificate dated on or after 01.04.2020 due to prevailing COVID-19 pandemic, they should upload the certificate obtained on or after 01.04.2019 and an undertaking form as per the format available in CCMN 2020 brochure (Annexure III a or b of CCMT 2020 brochure).
- Caste II: Those candidates who are not able to obtain the EWS/OBC certificate for the first time or possessing older EWS/OBC (before 01.04.2019) due to prevailing COVID-19 pandemic, they should upload the affidavit in Rs.50 stamp paper as per the format available in CCMN 2020 website under certificates.
- a. Those candidates who have appeared for final semester/year examination, provisional admission is permitted provided their final marks are made available on or before 30th September 2020. For such candidates, the examinations should be completed by 15th August 2020.
- b. Any candidate admitted provisionally shall produce the provisional/degree certificate and all mark lists in original on or before 30th September 2020. Else, their admission shall stand cancelled automatically. For such candidates refund will be made as per the institute norms.

3. Fee to be paid at the time of Admission (For details refer Annexure-I)

a. Institute Fees

Fee Details:

OC/EWS/OBC candidates should pay **Rs. 33,850**/- (Rs.48,850 $- 15,000^{+}$) towards the balance of institute fees through CCMN.

OC-PwD/EWS-PwD/OBC-PwD candidates should pay **Rs. 38,850**/- (Rs.48,850 $- 10,000^{+}$) towards the balance of institute fees through **CCMN**.

For SC/ST/SC-PwD/ST-PwD candidates, the institute fees is **Rs. 31,350**/- (Rs.41,350 - 10,000⁺) towards the balance of institute fees through **CCMN**.

+ paid as seat acceptance fee to CCMN.

b. Hostel Fees and Hostel Admission Details

Information regarding hostel accommodation and fee payment will be announced later.

For hostel fee details, refer the following link:

https://www.nitt.edu/home/students/facilitiesnservices/hostelsnmess/hostel-fees-odd-sem2019.pdf

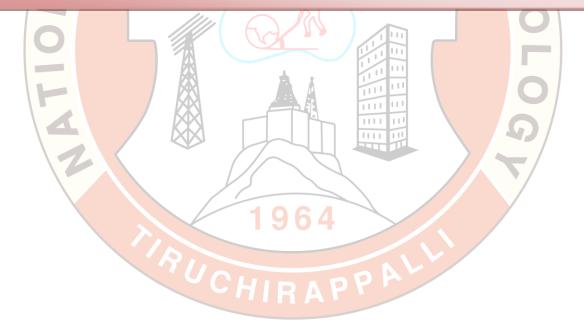
4. General Information

- i. Hostel Facilities: Separate Hostel facilities are available for boys and girls.
- ii. **Banking facility:** State Bank of India (SBI) branch is functioning in NIT, Tiruchirappalli (NITT), Campus. (Bank Branch Code: 1617). ATM facilities are also available.
- iii. Location of the Institute: Tiruchirappalli is well connected by Air, Rail and Road network. NITT is situated in a place called "THUVAKUDI" on the northern side of the Tiruchirappalli Thanjavur road, 20 Kms away from Tiruchirappalli junction. Tiruchirappalli junction is one of the important Railway junctions of Southern Railways.
- iv. **Reaching NITT Campus**: All mofussil buses plying between Tiruchirappalli Central Bus Stand and Thanjavur, stop at NITT Main Gate. (Tiruchirappalli Central Bus Stand is about half a KM from Tiruchirappalli Railway Junction).
- v. Town Bus No. 128 from Tiruchirappalli Central Bus Stand to Thuvakudi stops at NITT Main Gate.
 - A number of private Taxis, Call Taxis are available nearby Tiruchirappalli Junction and Central Bus Stand. The approximate Call Taxi fare from Tiruchirappalli Railway Station to NITT Main Building will be about Rs.500/-
 - If you are getting down at Chathiram Bus Stand/Main-Guard Gate (Commercial Centre of Tiruchirappalli), number of town buses ply between Chathiram Bus Stand/Main-Guard Gate and Thuvakudi.

5. Dress Code

Boys	:	All the boy students should come with formal dress to the class rooms & computer labs, preferably full pant and shirt. Wearing T-shirts and other informal dresses in the class rooms is strictly prohibited.
Girls	:	All the girl students should come with formal dress to the class rooms & computer labs, in Saree or Churidhar with Dupatta. Wearing T-shirts and other informal dresses in the class rooms & labs are strictly prohibited.

USE OF CELL PHONES / ELECTRONIC GADGETS IN THE ACADEMIC PREMISES IS STRICTLY PROHIBITED



6. Contact Address

Director	Dr.Mini Shaji Thomas, Director National Institute of Technology, Tiruchirappalli – 620 015. Phone No.: +91 431 2503002 E-mail: <u>director@nitt.edu</u>
Dean (Academic)	Dr.S.Shanmugam, Dean (Academic) National Institute of Technology, Tiruchirappalli – 620 015. Phone No.: +91 431 2503013 Mobile No.: +91 9486001105 E-mail: deanap@nitt.edu
Chairperson-PG Admissions	Dr. G. Lakshminarayanan Chairperson - PG Admissions National Institute of Technology Tiruchirappalli – 620 015. Phone No.: +91 431 2504940 Mobile No.: +91 9486001157 E-mail: pg@nitt.edu
Convener of Hostels	Dr.S.Suresh, Hostel Convener National Institute of Technology Tiruchirappalli - 620 015. Mobile No.: +91 9486001184 E-Mail : hac@nitt.edu
ciate Dean (PG) PG Admission Co	

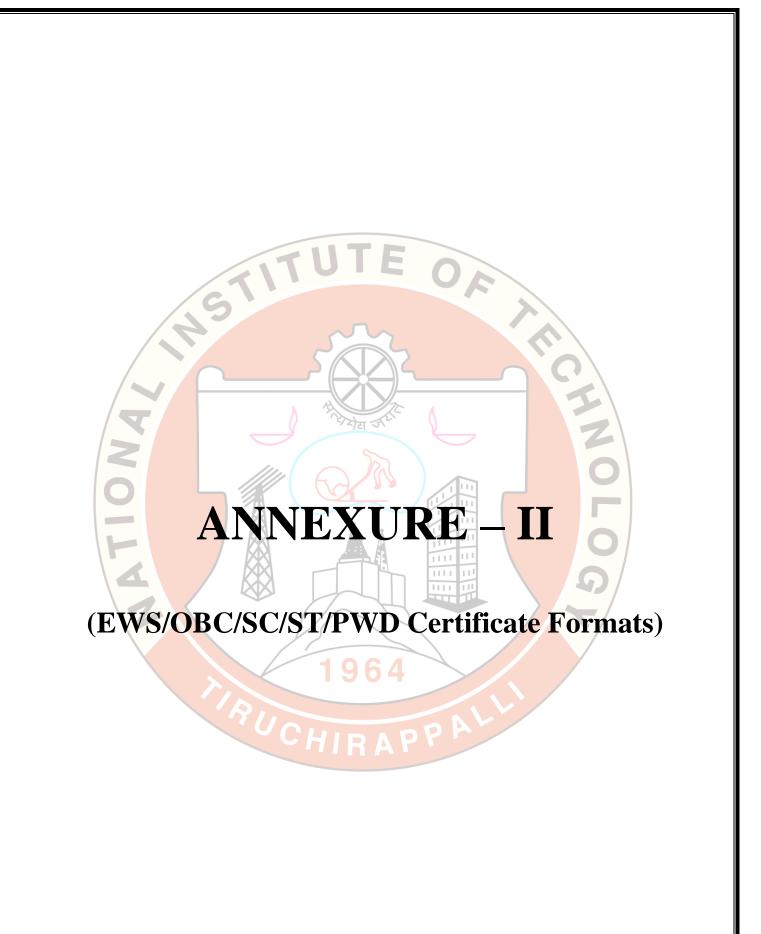
RUCHIRAPPALL

Annexure-I

Fee Details for M.Sc.

	No.	Items of Fees & Deposits	Amount in Rs.
I. I	nstit	tute Fees	
A.	Sen	nester Fees	
1	•	Tuition Fees [*]	7,500
B.	Anr	nual Fees	
1		Computer Fee	2,000
2.		Internet Fee	5 600
3.	(Library Fee	3,000
4.	-	Examination Fee	2,000
5.		Registration-Enrolment Fee	4 00
6		Association and Cultural	2,400
		Fee	
7.		Students Aid Fee	400
8.		Sports Facilitation Fee	800
9.		Medical and insurance Fee	500
	tal l		12,100
С.	One	e Time Fees	
1		Admission Fee	2,000
2			
		Campus Development Fee	10,000
3	·	Medical Exam Fee	10,000 250
	·		
3		Medical Exam Fee Seminar/Thesis Fee Institute Deposit	250
3 4 5		Medical Exam Fee Seminar/Thesis Fee Institute Deposit (Refundable)	250 5,000 5,000
3		Medical Exam Fee Seminar/Thesis Fee Institute Deposit (Refundable) Library Deposit	250 5,000
3 4 5 6		Medical Exam Fee Seminar/Thesis Fee Institute Deposit (Refundable) Library Deposit (Refundable)	250 5,000 5,000 2,000
3 4 5 6 7		Medical Exam Fee Seminar/Thesis Fee Institute Deposit (Refundable) Library Deposit (Refundable) Alumni Fee	250 5,000 5,000 2,000 1,000
3 4 5 6 7 8		Medical Exam Fee Seminar/Thesis Fee Institute Deposit (Refundable) Library Deposit (Refundable) Alumni Fee Convocation Fee	250 5,000 5,000 2,000 1,000 3,000
3 4 5 6 7	· · · ·	Medical Exam Fee Seminar/Thesis Fee Institute Deposit (Refundable) Library Deposit (Refundable) Alumni Fee Convocation Fee Alumni Global Interaction	250 5,000 5,000 2,000 1,000
3 4 5 6 7 7 8 9	· · · ·	Medical Exam Fee Seminar/Thesis Fee Institute Deposit (Refundable) Library Deposit (Refundable) Alumni Fee Convocation Fee Alumni Global Interaction Fee	250 5,000 5,000 2,000 1,000 3,000 1,000
3 4 5 6 7 8 9 To		Medical Exam Fee Seminar/Thesis Fee Institute Deposit (Refundable) Library Deposit (Refundable) Alumni Fee Convocation Fee Alumni Global Interaction Fee	250 5,000 5,000 2,000 1,000 3,000

* SC/ST students are exempted from payment of tuition fee.



INCOME & ASSEST CERTIFICATE TO BE PRODUCED BY ECONOMICALLY WEAKER SECTIONS

Government of

(Name & Address of the authority issuing the certificate)

Certificate No. _____

Date: _____

VALID FOR THE YEAR _____

1. This is to certify that Shri/Smt./Kumari		
son/daughter/wife of	permanent	resident of
, Village/Street		_ Post Office
District in the State/Union Territory		Pin Code
whose photograph is attested below belo	ngs to Econon	nically Weaker
Sections, since the gross annual income* of his/her family	** is below Rs.	8 lakh (Rupees
Eight Lakh only) for the financial year 2018-2019. His/her	family does not	own or possess
any of the following assets***:	·	-

- I. 5 acres of agricultural land and above;
- II. Residential flat of 1000 sq. ft. and above;
- III. Residential plot of 100 sq. yards and above in notified municipalities;

IV. Residential plot of 200 sq. yards and above in. areas other than the notified municipalities.

2.	Shri/Smt./Kumari				bel	ongs	to	the
	caste	which is not reco	gnized as a	a Scheduled	Caste,	Sched	uled	Tribe
and	Other Backward Class	ses (Central List).						

Signature with seal of Office _____

Name _____

Designation _____

Note:

Recent Passport size attested photograph of

the applicant

- * Income covered all sources i.e. salary, agriculture, business, profession, etc.
- ** The term 'Family" for this purpose includes the person, who seeks benefit of reservation, his/her parents and siblings below the age of 18 years as also his/her spouse and children below the age of 18 years.
- *** The property held by a "Family' in different locations or different places/cities have been clubbed while applying the land or property holding test to determine EWS status.

FORM OF CERTIFICATE TO BE PRODUCED BY OTHER BACKWARD CLASSES APPLYING FOR APPOINTMENT TO POSTS / ADMISSION TO CENTRAL EDUCATIONAL INSTITUTES (CEIs), UNDER THE GOVERNMENT OF INDIA

"This certificate MUST have been issued on or after 1st April 2020"

This is to cert	ify that Shri/Smt./Kum	Son/Daughter of Shri/Smt	
	of Village/Town		_ District/Division
	in the	_ State belongs to the	
Community w	hich is recognized as a backward class under:		
(i)	Resolution No. 12011/68/93-BCC(C) dated 10/09/93	published in the Gazette of	India Extraordinary Part I
(ii)	tion I No. 186 dated 13/09/93. Resolution No. 12011/9/94-BCC dated 19/10/94 publis 163 dated 20/10/94.	hed in the Gazette of India	Extraordinary Part I Section I
(iii)	Resolution No. 12011/7/95-BCC dated 24/05/95 publis 88 dated 25/05/95.	hed in the Gazette of India	Extraordinary Part I Section I
(iv) (v) No.	Resolution No. 12011/96/94-BCC dated 9/03/96. Resolution No. 12011/44/96-BCC dated 6/12/96 publis 210 dated 11/12/96.	hed in the Gazette of India	Extraordinary Part I Section I
(vi) (vii) (viii)	Resolution No. 12011/13/97-BCC dated 03/12/97. Resolution No. 12011/99/94-BCC dated 11/12/97. Resolution No. 12011/68/98-BCC dated 27/10/99.	had in the Constitution of India	Future and income Deat 1. Constitute 1.
(ix) No. (x)	Resolution No. 12011/88/98-BCC dated 6/12/99 publis 270 dated 06/12/99. Resolution No. 12011/36/99-BCC dated 04/04/2000 pul		·
. ,	 71 dated 04/04/2000. Resolution No. 12011/44/99-BCC dated 21/09/2000 pressure of the second sec		-
()	tion I No. 210 dated 21/09/2000. Resolution No. 12016/9/2000-BCC dated 06/09/2001. Resolution No. 12011/1/2001-BCC dated 19/06/2003. Resolution No. 12011/4/2002-BCC dated 13/01/2004. Resolution No. 12011/9/2004-BCC dated 16/01/2006		
ົ໌ Sec	tion I No. 210 dated 16/01/2006.		
	n and/or his family ordinar		
District/Division	on of State. This is also to	certify that he/she does not	belong to the
persons/secti	ons (Creamy Layer) mentioned in Column 3 of the Sched	ule to the Government of Ind	ia, Department of Personnel
& Training O. 09/03/2004.	M. No. 36012/22/93-Estt.(SCT) dated 08/09/93 which is n	nodified vide OM No. 36033/3	3/2004 Estt.(Res.) dated
Dated:			
Seal		District Magistrate Deputy Commission	
NOTE: (a)	The term 'Ordinarily' used here will have the same mea	aning as in Section 20 of the	Representation of the People
(b)	 Act, 1950. The authorities competent to issue Caste Certificates ar (i) District Magistrate / Additional Magistrate / C Commissioner / Deputy Collector / First Class St Magistrate / Executive Magistrate / Extra Assistant Magistrate). 	Collector / Deputy Commis ipendiary Magistrate / Sub-I	Divisional magistrate / Taluka

- (ii) Chief Presidency Magistrate / Additional Chief Presidency Magistrate / Presidency Magistrate.
- (iii) Revenue Officer not below the rank of Tehsildar and
- (iv) Sub-Divisional Officer of the area where the candidate and / or his family resides.

OBC Certificate issued from Maharashtra State must be validated by social welfare Department of Maharashtra Government

OBC UNDERTAKING

Declaration/undertaking - for OBC Candidates only

l,		son /	daughte	er of	Shri
	res	ident	of		
village/town/city				di	strict
Stat	e/UT hereby	declare	that I b	elong to	the
community	which is reco	ognised as	a backwai	rd class by	y the
Government of India for the purpose	of reservation	n in service	es as per or	ders conta	ained
in Department of Personnel and Tra	aining Office N	Nemorandu	um No.360	12/22/93-	Estt.
(SCT), dated 8/9/1993. It is also d	eclared that I	do not be	elong to pe	ersons/sec	tions
(Creamy Layer) mentioned in Colun	nn 3 of the So	hedule to	the above	referred C	Office
Memorandum, dated 8/9/1993, which	ch is modified	vide Depa	artment of	Personnel	and
Training Office Memorandum No.	36033/3/2004	Estt.(Res	.) dated §	9/3/2004.	Also
declare that the condition of st	atus/annual i	ncome fo	or creamy	layer of	my
parents/guardian is within prescribe	d limits as on	financial y	vear ending	on March	า 31,
2020.					

Signature of the Candidate

Place:			
·			

Date: _____

SC/ST Certificate Format

FORM OF CERTIFICATE TO BE PRODUCED BY A CANDIDATE BELONGING TO SCHEDULED CASTE OR SCHEDULED TRIBE

This is to certify that Shri/Sm	t./Kum	Son/Daughter of Shri
	of village/Town	
	of the State/Union Territory	belongs to the
caste/Tribe, which is recogniz	zed as a Schedule Caste/Scheduled Tribe under.	
	heduled Castes) order, 1950. heduled Tribes) order, 1950.	
	heduled Castes)(Union Territory) order, 1951. heduled Tribes) (Union Territory) order, 1951.	
Punjab Reorganizati	Scheduled Castes and Scheduled Tribes (Modification) Or on Act, 1966, The State of Himachal Pradesh Act, 1970, th Castes and Scheduled Tribes orders (Amendment) Act, 197	e North Eastern Areas (Reorganization Act, 1971)
*The Constitution (A Tribes orders (Amen *The Constitution (D *The Constitution (P *The Constitution (P *The Constitution (U *The Constitution (G *The Constitution (G *The Constitution (N *The Constitution (S *The Constitution (S *The Constitution (S *The Constitution (S *The Constitution (S	ammu & Kashmir) Scheduled Caste Order, 1956; Indaman and Nicobar Islands) Scheduled Tribes, 1959, as Indement) Act. 1976; adra and Nagar Haveli) Scheduled Castes Order, 1962; adra & Nagar Haveli) Scheduled Tribes Order, 1964; ttar Pradesh) Scheduled Castes Order, 1964; ttar Pradesh) Scheduled Tribes Order, 1967; Ioa, Daman & Dieu) Scheduled Castes Order, 1968; Ioa, Daman & Dieu) Scheduled Tribes Order, 1970; Ikkim) Scheduled Tribes Order, 1978; Ikkim) Scheduled Tribes Order, 1978; Icheduled Castes) Orders (Amendment) Act, 1990. Cheduled Tribes) Order, (Second Amendment) Act, 1991. Cheduled Tribes) Ordinance, 1996	amended by the Scheduled Castes and Schedule
	the basis of the Scheduled Castes/Scheduled Tribes Ce	
Shri village/town	Father of Shri in District/Division	of of the State/UT
	who belongs to the caste/	Tribe which is recognized as a SC/ST in the
State/Union Territory	issued by the	(name of the
prescribed issuing authority)	vide their No.	dated or Shri
	and or his/her family ordinarily res	de(s) in Village/Town
	_of District/Division of the State	Union Territory of
Place	Signature	

Date_____

Designation _____

(With seal of Office)

NOTE: - The terms ordinarily reside(s) used here will have the same meaning as in Section 20 of the Representation of the People Act, 1950.

SC Certificate issued from Maharashtra State must be validated by Social Welfare Department and ST Caste certificate must be validated by Tribal Development Department of Maharashtra Government

LIST OF AUTHORITIES EMPOWERED TO ISSUE CASTE/TRIBE CERTIFICATE:

1. District Magistrate/Additional District Magistrate/Collector/Deputy Commissioner /Additional Deputy Commissioner/Dy. Collector/ ^{1st} Class Stipendiary Magistrate/Sub Divisional Magistrate/Extra Assistant Commissioner/Taluka Magistrate/Executive Magistrate.

2. Chief Presidency Magistrate/Additional Chief Presidency Magistrate/Presidency Magistrate.

3. Revenue Officers not below the rank of Tahsildar.

4. Sub-Divisional Officers of the area where the candidate and/or his family normally resides.

PWD Certificate Format

DISABILITY CERTIFICATE FORMAT - II

{In cases of amputation or complete permanent paralysis of limbs and in cases of blindness}

(NAME AND ADDRESS OF THE MEDICAL AUTHORITY ISSUING THE CERTIFICATE)

Signature/LTI/RTI of the Candidate

Passport size photograph of the Candidate

Date:

This is to certify that I have carefully exa	imined Shri	i/Smt./	/Kum.				,
son/wife/daughter of Shri		D	ate of	Birth	1	/	/
[Age years], male/female, Regi	stration No)					
permanent resident of House	No			,		Ward/Villa	ge/Street
	Post	Offic	e				
District	State _					,	whose
photograph is affixed above, and am satisfie	ed that						
 he/she is a case of (Please tick as applical a. locomotor disability b. blindness the diagnosis in his/her case is 							
 the diagnosis in his/her case is							——· n words)
permanent physical impairment/	/blindness	iı	1	relati	ion	to	his/her
specified).	\I		5,		1	e	
4. The applicant has submitted the following	g document	as pro	pof of 1	reside	nce:		

Nature of Document	Date of Issue	Details of authority issuing the
		certificate

Official Seal:

[Authorised Signatory of notified Medical Authority]

Name: _____

DISABILITY CERTIFICATE FORMAT - III

{In cases of multiple disabilities}

(NAME AND ADDRESS OF THE MEDICAL AUTHORITY ISSUING THE CERTIFICATE)

No. - _____

Signature/LTI/RTI of the Candidate

Date:_____

Passport size photograph of the Candidate

This is to ce	ertify that I h	ave car	efully exar	nined Shr	i/Smt./Kum	•		,
son/wife/dau	ghter of Shri	i			Date of	f Birth	/	/
[Age	years], n	nale/fem	nale, Regis	tration N	0			
permanent	resident	of	House	No		,	Ward/V	Village/Street
				Post	Office _			
District				State _				, whose
photograph is	s affixed abov	ve, and a	am satisfied	d that				

1. He/she is a Case of **Multiple Disability**. His/her extent of permanent physical impairment/disability has been evaluated as per guidelines (to be specified) for the disabilities ticked below, and shown against the relevant disability in the table below:

S. No.	Disability	Affected Part of Body	Diagnosis	Permanent physical impairment/mental disability (in %)
1.	Locomotor disability	@		
2.	Low vision	#		
3.	Blindness	Both Eyes		
4.	Hearing impairment	£		
5.	Mental retardation	Х		
6.	Mental-illness	Х		

Contd.

2. In the light of the above, his/her overall permanent physical impairment as per guidelines (to be specified), is as follows:

In figures:______%
In words: ______ percent

3. The above condition is progressive/ non-progressive/ likely to improve/ not likely to improve.

4. Reassessment of disability is:

(i) Not Necessary [or]
(ii) is recommended/after____years____months, and therefore this certificate shall be valid till (DD/MM/YY)____.
@ - e.g. Left/Right/both arms/legs
- e.g. Single eye/both eyes
£ - e.g. Left/Right/both ears

5. The applicant has submitted the following document as proof of residence:

Nature of Document	Date of Issue	Details of authority issuing the certificate

6. Signature and seal of the Medical Authority:

Name and Seal of Member	Name and Seal of Member	Name and Seal of the Chairperson

DISABILITY CERTIFICATE FORMAT - IV

{In cases of any other case not covered in Format – II & III}

(NAME AND ADDRESS OF THE MEDICAL AUTHORITY ISSUING THE CERTIFICATE)

No. - _____

Signature/LTI/RTI of the Candidate

Date:_____

Passport size photograph of the Candidate

This is to ce	rtify that I h	ave car	efully exar	nined Shr	·i/Smt./Ku	m		,
son/wife/dau	ghter of Shri	i			Date	of Birth	/	/
[Age	years], n	nale/fem	nale, Regis	tration N	0			
permanent	resident	of	House	No	. <u></u>	,	Ward/V	/illage/Street
				_ Post	Office			
District				State _				, whose
photograph is	s affixed abov	ve, and a	am satisfied	l that				

1. He/she is a Case of **Multiple Disability**. His/her extent of permanent physical impairment/disability has been evaluated as per guidelines (to be specified) for the disabilities ticked below, and shown against the relevant disability in the table below:

S. No.	Disability	Affected Part of Body	Diagnosis	Permanent physical impairment/mental disability (in %)
1.	Locomotor disability	@		
2.	Low vision	#		
3.	Blindness	Both Eyes		
4.	Hearing impairment	£		
5.	Mental retardation	Х		
6.	Mental-illness	Х		

Contd.

2. In the light of the above, his/her overall permanent physical impairment as per guidelines (to be specified), is as follows:

In figures:	%	
In words:		percent

3. The above condition is progressive/ non-progressive/ likely to improve/ not likely to improve.

4. Reassessment of disability is:

(i) Not Necessary [or]
(ii) is recommended/after____years____months, and therefore this certificate shall be valid till (DD/MM/YY)____.
@ - e.g. Left/Right/both arms/legs
- e.g. Single eye/both eyes
£ - e.g. Left/Right/both ears

5. The applicant has submitted the following document as proof of residence:

Nature of Document	Date of Issue	Details of authority issuing the
		certificate

Official Seal:

[Authorised Signatory of notified Medical Authority]

Name: _____

* In case this certificate is issued by a medical authority who is not a government servant, it shall be valid only if countersigned by the Chief Medical Officer of the District. Note: The principal rules were published in the Gazette of India vide notification number S.O. 908(E), dated the 31st December, 1996.

Countersigned^

Official Seal:

[CMO/Medical Superintendent/Head of Govt. Hospital]

Name: ______

^Countersignature and seal of the CMO/Medical Superintendent/Head of Government Hospital is essential in case the certificate is issued by a medical authority who is not a government servant.

Annexure-III

NATIONAL INSTITUTE OF TECHNOLOGY, TIRUCHIRAPPALLI-15 OFFICE OF THE ACADEMIC

DECLARATION FOR THE LATE SUBMISSION OF RELEVANT DOCUMENTS

Candidate's Details:

Name of the Candidate	
Date of Birth	
JAM Registration Number	
JAM Score	
Qualifying Degree Passing Status	Appeared / Passed
Qualifying Degree	B.Sc
Mobile Number	
Email id	

Allotment Details

Allotted Specialization	M.Sc
Allotted Category	

The following certificates are not currently available with me due to late declaration of result/non-issuance of certificate. I undertake that I will submit the following certificate(s) on or before **30th September 2020**, failing which I shall forgo my admission at NIT Tiruchirappalli. I aware that all exams of my qualifying degree should have been completed by **15th August 2020**. Further, I aware that I will get the stipend only after submission of the following certificates:

- 1. Original Provisional / Degree certificate
- 2. Original Transfer Certificate/Migration Certificate
- 3. Original Grade / Mark Sheets
- 4. Any other*

Date:

Signature of the Candidate

*Note: This late submission form is not applicable for CATEGORY CERTIFICATE. EWS/OBC/SC/ST candidates should produce the required original category certificate for verification.