



C.L. PATEL INSTITUTE OF STUDIES AND RESEARCH IN RENEWABLE ENERGY

(A CVM Institution)

ARIBAS Campus, New Vallabh Vidyanagar - 388 121, Anand, Gujarat, India

Phone : +91-2692-229189, 233680-132

E-mail : isrre.cvm@gmail.com Website : www.ecvm.net/isrre



ADMISSION FORM - 201_

M. Sc. - Renewable Energy

Semester :

Form No :

Passport
Size
Photograph

Graduation Details

Sem. (5 th & 6 th) / Final Year	Name of the University	Total Marks /GPA Obtained		Total % of Marks / GPA		Total % of Marks/GPA (Theory + Practical)
		Theory	Practical	Theory	Practical	
Specialization						

B.E. Details

Sem. (7 th & 8 th) / Final Year	Name of the University	Total Marks /CPI Obtained		Total % of Marks/ CPI		Total % of Marks/CPI (Theory + Practical)
		Theory	Practical	Theory	Practical	
Specialization						

To
The Director

Sub. : Application for admission in Master of Science Programme

Respected Sir,

I desire to apply for admission in Master of Science at your institute. Necessary particulars are furnished here with.

I request you to grant me admission.

Personal Details

Name: Mr./Ms. _____
(Use Capitals) (As it appears in official records)

Address for Correspondence : _____

City : _____ Dist. _____ State : _____ Pin : _____

Date of Birth : _____ Place of Birth : _____ Male/Female : _____ Nationality : _____

Mother Tongue : _____ Religion : _____ Category (General / ST / SC / OBC / Others) : _____

Email ID (Student) : _____ Mobile (Student) : _____

Father's Name: Mr./ Dr. _____

Father's Occupation : _____ Email ID (Parent) : _____

Phone No.(with STD Code)(R) _____ (O) _____ Mobile (Parent) : _____

For Official Use

Form No:- _____

Date :- _____ Name:- _____ Receiver's Sign _____

Course :- **M.Sc. - Renewable Energy**

Total Marks in external theory and practical examinations :

Subject : _____

Semester	Marks/GPA Obtained Aggregate	Marks Obtained in Practical	Aggregate Percentage	Result (Pass / ATKT)	Passing Month & Year
Semester-I					
Semester-II					
Semester-III					
Semester-IV					
Semester-V					
Semester-VI					
Semester-VII					
Semester-VIII					

All information given above is correct to the best of my knowledge. I hereby submit a separate undertaking to observe the rules and regulations of the Institute.

Date : _____

Signature of the applicant _____

Note :

Please attach

1. Certified true copy of final year mark sheet / Grade sheet
2. Certified true copy of School Leaving Certificate.
3. Two Passport Size Photograph.

GENERAL RULES

1. The students joining this Institute are expected to put in 100 % presence in all academic activities.
2. The behavior of the student with one and all should be courteous, polite and disciplined. The admission of the student violating the code of conduct will be cancelled.
3. The fees and other charges once paid will not be refunded under any circumstances.
4. The fees and other charges will not be refunded to :
 - (a) Provisionally admitted students who fail to produce final Eligibility Certificate of University and consequently the admission will be cancelled.
 - (b) The students whose terms are not granted by University.
5. Any type of deposit will be refunded after completion of the degree course.
6. Bringing or using mobile in the institute is not permitted. Use of any drugs / smoking leads to cancellation of admission.
7. Ragging in the institute and hostel is prohibited and strict action against such student will be taken.
8. Hostel is compulsory for the students coming beyond 25 km.
9. Only such programmes can be held which are approved by the institute/university.
10. Any legal dispute will be subjected to Anand Jurisdiction.

I have read the prospectus and the form with undertaking carefully and I will abide by the rules laid down by the Institute and the rules relating to the attendance, class-work assignment, test performance, general discipline and other things, failing which, I will not be allowed to appear at the university examination.

 Signature of the applicant

 Signature of the parent

DD Details :

In favour of **INSTITUTE OF STUDIES AND RESEARCH IN RENEWABLE ENERGY (ISRRE)** payable at
ANAND / VALLABH VIDYANAGAR

DD No. : _____ Date : _____ Amount ₹ : _____

Bank : _____ Branch : _____



C. L. PATEL INSTITUTE OF STUDIES AND RESEARCH IN RENEWABLE ENERGY
(A CVM Institution)

ARIBAS Campus, New Vallabh Vidyanagar - 388 121, Anand, Gujarat, India

Phone : +91-2692-229189, 233680-132

E-mail : isrre.cvm@gmail.com Website : www.ecvm.net/isrre

UNDERTAKING

I, the undersigned, hereby assure the Institute authorities that as a student of the Institute, I am required to:

1. Attend (a) Lectures (b) Tutorials (c) Practicals (d) CDC (e) Guest lectures (f) Internet and (g) all other extra co-curricular activities organized by the Institute regularly.
2. Note that the fees or charges once paid will not be refunded under any circumstances, even if
 - (a) I am provisionally admitted and fail to produce final eligibility certificate.
 - (b) My terms are not granted by the University.
 - (c) Admission is cancelled at my request or by the authorities.
3. Note that in the event of cancellation of my admission at my request or otherwise, only the caution money deposit will be refunded on surrendering all the original receipts. No photocopies will be produced for the purpose.
4. Take prior permission from the Director / Counselor for the leave of absence from the Institute.
5. Submit the medical certificate issued by the Registered Medical Officer for the period for which I may be sick within ten days of the recovery, along with the letter from my parents and telephonic confirmation from the Parents / Guardians to that effect.
6. Observe general discipline code of the Institute and will not be a party to any misdemeanor in the Institute.
7. Refrain from using unfair means in all the examinations and I shall not be aiding or abetting in using unfair means in the examinations.
8. Carry my Identity Card in the Institute premises and produce it whenever any authorized Institute's/CVM's person asks for it, failing which I am liable for disciplinary action against me.
9. Submit certificate stating absence due to participation in sports or co-curricular activities within ten days of completion of the event.
10. Note that granting of leave of absence does not mean that I shall be exempted from completing the required number of days of attendance in theory or practical for certification of the journal.
11. Inform immediately the change in my address and/or telephone number to the office.
12. Note that bringing or using Mobile phones in the Institute is not permitted. If I am found with the Mobile in the Institute, the Institute can take any action for the same.
13. As per University rules, minimum 80 % attendance in the classes during an academic year is compulsory. For attendance below 80%, I shall be solely responsible and shall face the consequences.
14. Hostel admission is compulsory for the students coming beyond 25 km. I am aware that use of any drugs / smoking in the institute or hostel leads to cancellation of admission.

15. Only such programmes can be held which are approved by the Institute or University.
16. In case the admission is cancelled in the midst of the course, no claim will be made for the refund.
17. Any legal matter is subject to Anand jurisdiction

(M. Sc. — Renewable Energy)

Name of the Student : _____
(First Name) (Middle Name) (Surname)

Semester : _____

Address : _____

Phone No. (with STD Code) :_____ **Mobile No. (Student):**_____

Email ID (Student) : _____

I have carefully read in detail the Prospectus of the institute. I agree to abide by all the rules and regulations of the institute in force as well as those that will be made applicable thereafter. I shall also endeavour to enhance the reputation of the institute. I shall also observe all the rules of discipline in and outside the institute. I also undertake to attend all the periods/practicals in all the subjects regularly from the very first day of each term. I also agree to abide by all the rules of the institute and the university with respect to class-room attendance, work-assignments and test performances.

I have read the above rules and I agree to abide by them.

Date :

Place :

Student's Signature

Parent's Signature