

**Application form Registration for III B.TECH II SEM (NECR BTECH 20)
(For 2020 Regular & 2021 Lateral Entry admitted batches only)
(Read instructions carefully before filling the application)**

CIVIL

Whether the candidate is
Appearing for

Regular Examination

Supplementary Examination

Month & Year of Examination

H.T.No

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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**Affix a recent
Passport size
Photograph.**

Name: (As
Per S.S.C
Certificate)

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Father's
Name:

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Mother's
Name:

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Date of Birth (As per SSC Marks Memo) :

Student Aadhar Number

Mobile Number (if any):

E-Mail Id :

Tick [√] the appropriate box

Sex: Male Female **Caste OC/BC-A/B/C/D/E/SC/ST**

Subject for which registration is required:

<input type="checkbox"/>	20CE2011	Concrete technology
<input type="checkbox"/>	20CE2012	Environmental Engineering
<input type="checkbox"/>	20CE2013	Highway Engineering
<input type="checkbox"/>	20CE4009	Irrigation Engineering
<input type="checkbox"/>	20CE4011	Prestressed Concrete
<input type="checkbox"/>	20MB3007	Human Resource Planning
<input type="checkbox"/>	20CS3005	Principles of Data Bases
<input type="checkbox"/>	20CE2509	Concrete Tech and Highway Engineering lab
<input type="checkbox"/>	20CE2510	Environmental Engineering Lab
<input type="checkbox"/>	20CD6004	Career competency Development IV
<input type="checkbox"/>	20CC6004	Value added course/Certificate course IV
<input type="checkbox"/>	20MC8013	Mandatory course III

Certified that the above information is CORRECT and Filled by me.

Signature of the Candidate

Enclosures to the application:

Photo Copy of Evaluation & Grade Sheet Payment Receipt



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ECE

Whether the candidate is
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Regular Examination

Supplementary Examination

Month & Year of Examination

H.T.No

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Name: (As
Per S.S.C
Certificate)

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Father's
Name:

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Mother's
Name:

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Date of Birth (As per SSC Marks Memo) :

Student Aadhar Number

Mobile Number (if any):

E-Mail Id :

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Passport size
Photograph.

Tick [√] the appropriate box

Sex: Male Female Caste OC/BC-A/B/C/D/E/SC/ST

Subject for which registration is required:

	20EC2011	Digital Design using HDL
	20EC2012	Digital Signal Processing
	20EC4012	Electronic measurement and Instrumentation
	20EC4014	Introduction to MEMS
	20CS3004	Advanced Java Programming
	20EC2507	Digital Signal Processing Lab
	20EC2508	Integrated Circuits Lab
	20EC2509	Electronic Design Workshop
	20CD6004	Career Competency Development IV
	20CC6004	Value Added Course/ Certificate Course IV

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CSE

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 Supplementary Examination

Month & Year of Examination

H.T.No

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Photograph.**

Name: (As Per S.S.C Certificate)

Father's Name:

Mother's Name:

Date of Birth (As per SSC Marks Memo) :
Student Aadhar Number
Mobile Number (if any):
E-Mail Id :

Tick [√] the appropriate box
Sex: Male Female **Caste OC/BC-A/B/C/D/E/SC/ST**

Subject for which registration is required:

<input type="checkbox"/>	20CS2011	Mobile Application Development
<input type="checkbox"/>	20CS2012	Web Technologies
<input type="checkbox"/>	20CS4007	Software Architecture
<input type="checkbox"/>	20CS4014	Cloud Computing
<input type="checkbox"/>	20HS5001	Managerial Economics & Financial Analysis
<input type="checkbox"/>	20EC3006	Internet of Things
<input type="checkbox"/>	20CS2508	Coding Lab II
<input type="checkbox"/>	20CS2509	Mobile Application Development Lab
<input type="checkbox"/>	20CS2510	Web technologies Lab
<input type="checkbox"/>	20CD6004	Career competency Development IV
<input type="checkbox"/>	20CC6004	Value added course/Certificate Course IV
<input type="checkbox"/>	20MC8013	Mandatory course III

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