



POGL Institute
 3rd floor, Institution of Engineers (India) building
 Panbazar, Guwahati-781001
 Phone: 0-9435545852
 e-mail: poglinstitute@yahoo.com
 Visit: www.poglinstitute.org

Please attach a
 self signed
 Passport size
 colored
 Photograph

APPLICATION FORM FOR DEGREE & DIPLOMA COURSES

Course applied for	
---------------------------	--

Applicant Ref No (will be allocated by the Institute)	
Date Received (entered by the Institute)	

Section 1		Personal Details (BLOCK Letters Please)				
Surname/Family Name						
Forename 1						
Forename 2						
Title: (Miss/Ms/Mrs/Mr/Dr)						
Date of Birth	DD	<input type="text"/>	MM	<input type="text"/>	YY	<input type="text"/>

Father's Name	
Occupation	
Salary per annum	

Have you been a student in this Institute before? (please tick the appropriate box)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, please give your Student Identification number, if known		

Section 2		Address Details (BLOCK Letters Please)			
Contact Address (for correspondence)					
Postcode					
Telephone Number (With country and area code)	Cell No.		Residence		
E-mail Address					
Permanent Home Address (if different from above)					
Postcode					

Section 10**Personal Statement**

Please enter below a personal statement by yourself which could include details of your aptitude for study; details of relevant practical experience, responsibilities, outside interests; reasons for wishing to study in the Institute; where appropriate.

Large empty area for writing the personal statement.

Declaration

I certify that the information given in this application is correct and complete. If I am admitted to the Institute I undertake to observe the Institute's Regulations and to ensure payment of tuition fees and other financial liabilities to the Institute. I agree that the Institute may process personal data contained in this form, or other data which the Institute may obtain from me or other people whilst I am an applicant and student, for any purposes connected with my application or for any other legitimate reason.

Signature of Applicant:

Date:

Section 11

Father / Mother / Guardian's Undertaking

My Son/Daughter/Ward _____ is seeking admission with my consent and in the event of his/her being admitted to POGL Institute.

I will be personally responsible for:

1. His/Her good conduct and behavior during his/her education at the Institute.
2. Return of books issued to him/her by the Institute.
3. Any other liability related to his her education at the Institute. Further, I undertake to pay his/her fees and other expenses at the Institute and on educational tours. I also agree that he/she shall abide by the rules of discipline of the centers as administered by the Institute Authorities.

Place:

Date:

Signature of Father/ mother
Name & Address

(For Office Use Only)

Application received on:
Enclosed not attached:
Form Checked by:

Note: - Fee once deposited will not be refunded even in any case.