

Ghani Khan Choudhury Institute of Engineering and Technology

(A CFTI under the Ministry of Education, Govt. of India) Narayanpur, Malda -732141, West Bengal

Date: 20/10/2020

Notification/Guidelines Admission/Registration in B.Tech Programs through JoSAA/CSAB Counseling for Academic Year of 2020-21

All Candidates,

Greetings from Ghani Khan Choudhury Institute of Engineering and Technology, Malda — a Centrally Funded Technical Institute (CFTI) established under the Ministry of Education, Govt. of India! In this Academic Year of 2020-21, our Institute is offering AICTE approved B. Tech programs (4 years duration) in (i) **Electrical Engineering**, (ii) **Food Technology** and (iii) **Mechanical Engineering** affiliated to Maulana Abul Kalam Azad University of Technology (MAKAUT), West Bengal.

The admission criteria are:

- (a) Secured a rank in JEE (Mains) AND
- (b) Candidate/s must pass Class XII or equivalent Board Exam in 2018/2019/2020 with Physics, Maths, Chemistry/Biology/Biotechnology/technical vocation subject, a Language subject plus any other subject.

For admission to B. Tech programs in GKCIET, Malda, 'Home State Quota' includes those candidates hailing (i.e. passing class XII exams) from Arunachal Pradesh, Assam, Nagaland, Manipur, Meghalaya, Mizoram, Sikkim and Tripura. 'Other state quota' is defined for candidates other than the states of Arunachal Pradesh, Assam, Nagaland, Manipur, Meghalaya, Mizoram, Sikkim, Tripura and West Bengal.

You are most welcome in this Institute. However, as a part of the admission in above B. Tech programs, you are hereby requested to follow below mentioned process:

(1) Please attend following Webinar/s for clarification, if any and know about the Institute

You are strongly encouraged to go through the details of our Institute, all departments and facilities available in our Institute website at www.gkciet.ac.in and a short documentary on our Institute and an introductory speech by our Hon'ble Director Sir available in the link: https://youtu.be/jYXNwi4FJsM. Additionally, we would advise you to participate in the following webinars:

	Date	Time	Link	
1st Round	19.10.2020	1:00pm	https://global.gatamosting.com/join/904904072	
150 Kounu	(Monday)	onwards	https://global.gotomeeting.com/join/894894973	
2 nd	22.10.2020	1:00pm	http://d-h-h-l	
Round	(Thursday)	onwards	https://global.gotomeeting.com/join/894894973	
3 rd	27.10.2020	1:00pm	https://global.gotomeeting.com/join/894894973	

Round	(Tuesday)	onwards		
4 th	31.10.2020	1:00pm	https://global.gotomeeting.com/join/894894973	
Round	(Saturday)	onwards	https://giobal.gotolileeting.com/join/694694975	
5 th	04.11.2020	1:00pm	https://global.gotomosting.gom/join/004004072	
Round	(Wednesday)	onwards	https://global.gotomeeting.com/join/89489497	
6 th	09.11.2020	1:00pm	https://global.gotomeeting.com/join/894894973	
Round	(Monday)	onwards	intips.//giobai.gotoineeting.com/join/6946949	

New to GoToMeeting? Get the app, and be ready when your first meeting starts, at https://global.gotomeeting.com/install/249077165. Regarding any technical details & clarification, please contact *Mr. Gopal Bandyopadhyay at 7866931527*.

Before attending the webinar, you may send your details (name, contact no./WhatsApp no., e-mail ID and department allotted etc.) in following department-wise e-mail IDs:

Electrical Engineering	admission_ee@gkciet.ac.in	
Food Technology	admission_ft@gkciet.ac.in	
Mechanical Engineering	admission_me@gkciet.ac.in	

Additional webinar will be arranged as per requirement/demand of the candidates. You are therefore asked to send your request in the above e-mail IDs (department-wise). Schedule of the additional webinars will be announced in the Institute website (www.gkciet.ac.in) accordingly.

You may contact the following officials for your clarification:

Dr. Debrup Hui	7866931505	About Webinar, Institute, Training & Placement
Dr. Sandip Chanda	7866931504	About Electrical Engineering Dept. & Fee Payment
Dr. Kshirod Kumar Dash	7866931516	About Food Technology Dept.
Dr. Hasibur Rahaman	7866931525	About Mechanical Engineering Dept.
Mr. Dharmeswar Dash	7866931518	About necessary documents
Dr. Koushik Paul	7866931508	About process of admission, filling form & others
Dr. Nilkanta Barman	7866931503	Overall

(2) Submission of following documents through e-mails only (department-wise as per above e-mail IDs)

Sl. No.	Items
	Duly filled in Application Form
	(The application format is available in our Institute website, www.gkciet.ac.in,
(;)	please see Annexure-I) (Please visit the Disciplinary Rules & Regulation for
(i)	Students of this Institute as available in Institute website at www.gkciet.ac.in
	before filling your Application Form, all students of this Institute must obey the
	same during their stay of Degree Program)
(;;)	Copy of Rank Card/Score Card of JEE (Mains)-2020
(ii)	(Scan Copy of the Original or Self Attested in case of Xerox/Print Copy)
(;;;)	Copy of Provisional Seat Allocation Letter issued by the JoSAA/CSAB
(iii)	(Scan Copy of the Original or Self Attested in case of Xerox/Print Copy)
(iv)	Copy of any other documents issued by the JoSAA/CSAB

	(Scan Copy of the Original or Self Attested in case of Xerox/Print Copy)
	Migration Certificate (for such candidate who passed before the year of 2020
(v)	and admitted for their higher study in any Institute/College/ University etc.) or
	a declaration in a Stamp Paper of Rs. 10/- by the Candidate and
	Parents/Guardian mentioning not pursuing any higher study or Migration
	Certificate is to be submitted (if applied for the same or not available) by end of
	November, 2020.
	(For declaration format, please see Annexure-II)
	(Send Scan Copy of original document only)
(vi)	Copy of Admit Card of Secondary or equivalent examination
(٧1)	(Scan Copy of the Original or Self Attested in case of Xerox/Print Copy)
(vii)	Copy of Mark-sheet of Secondary or equivalent examination
(VII)	(Scan Copy of the Original or Self Attested in case of Xerox/Print Copy)
(viii)	Copy of Certificate of Secondary or equivalent examination
(*111)	(Scan Copy of the Original or Self Attested in case of Xerox/Print Copy)
(ix)	Copy of Admit Card of H.S. or equivalent examination
(171)	(Scan Copy of the Original or Self Attested in case of Xerox/Print Copy)
(x)	Copy of Mark-sheet of H.S. or equivalent examination
()	(Scan Copy of the Original or Self Attested in case of Xerox/Print Copy)
(xi)	Copy of Certificate of H.S. or equivalent examination (if available)
	(Scan Copy of the Original or Self Attested in case of Xerox/Print Copy)
(xii)	Address Proof/Domicile Certificate from the Competent Authority
	(Format as per Annexure-III) (Send Scan Copy of Original by e-mail)
(xiii)	Copy of Aadhar Card of the Candidate
	(Scan Copy of the Original or Self Attested in case of Xerox/Print Copy)
	Copy of Caste Certificate issued by the competent authority for candidates those
(xiv)	are allotted under category of SC/ST/OBC-NCL. OBC-NCL certificate issued
	on/after 01.04.2020 will be acceptable.
	(Scan Copy of the Original or Self Attested in case of Xerox/Print Copy)
(xv)	Copy of Physically Challenged Certificate issued by the competent authority for candidates those are allotted under category of PwD.
(xv)	(Scan Copy of the Original or Self Attested in case of Xerox/Print Copy)
	Copy of GEN-EWS Certificate issued by competent authority (as per Annexure -
	IV) for candidates those are allotted under scheme of General-Economically
(xvi)	Weaker Sections. GEN-EWS certificate issued on/after 01.04.2020 will be
(AVI)	acceptable.
	(Scan Copy of the Original or Self Attested in case of Xerox/Print Copy)
	Physical Fitness Certificate of Candidate (as per Annexure-V)
(xvii)	(Send Scan Copy of Original document by e-mail)
<i>(</i>)	Copy of Affidavit for Anti-Ragging by Candidate in a Stamp Paper of Rs. 10/- as
(xviii)	per format of Annexure-VI (Send Scan Copy of Original document by e-mail)
(:)	Copy of Affidavit for Anti-Ragging by Parents in a Stamp Paper of Rs. 10/- as
(xix)	per format of Annexure-VII (Send Scan Copy of Original by e-mail)
(xx)	Copy of School Leaving Certificate (Send Scan Copy of Original by e-mail)
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(xxii)	Up-gradation form, if any.
(xxiii)	Income Certificate (optional for students)

(In case of self attested copy, you may take photocopy/xerox of original documents. Sign on them, then scan those signed copies and send via e-mail.)

- (a) Make a single .pdf file of all above documents and name the file as department_yourfullname_GENRank.pdf
- (b) In case individual file, name the file as department_yourfullname_GENRank_SINo.of Items (like 2_i).pdf or department_yourfullname_GENRank_SINo.of Items (like2_i).jpg

Send all documents by a single mail mentioning your name, father's name and department allotted, and GEN & Category (if applicable) Ranks. Please note that at this stage, there is no need for any admission/registration fees payment, hence the payment details in Application Form will be blank. The fee has to be paid later on when you are sending us the hard copy of your documents through Speed Post/Registered Post. At that stage you need to fill up fee payment details in Application Form.

(3) Verification of all documents after receiving through e-mails

After receiving all required documents from each candidate in above e-mail of respective department, the concerned departmental officers will contact with the candidate/parents over telephone, WhatsApp Chat/Video Calling or other digital video mode for verification of all documents. During verification, all original documents are to be shown by the candidate and concerned officers are also to be satisfied with your documents. Thereby, all candidates are requested to keep ready all above required documents serially before the verification. Your verification schedule, verification report and any declaration on your documents as per requirement/institute norms will be informed by the concerned departmental officials.

(4) Payment of Fees (for 1st Semester Only)

Only after successful verification of all documents, an admission/registration fee (1st Semester Fee) of **Rs. 18,620/-** is to be paid for admission. Fee Structure for B. Tech programs of 4 years duration is enclosed as **Annexure-VIII**.

(Other fees, if any as per the Institute/affiliating University, will be collected after your admission, and your seat acceptance fee paid to JoSAA/CSAB will be refunded as and when JoSAA/CSAB sends it to us)

The payment can be made either by

(A) Preferably Online Transfer (NEFT/IMPS/Phone Pe/Google Pay etc)

Details of the Institute Bank Account where the above mentioned amount is to be transferred through NEFT/IMPS/Phone Pe/Google Pay for confirming your admission in our Institute are:

A/c Holder	Ghani Khan Choudhury Institute of Engineering and	
	Technology	
A/c No.	919010044132909	
IFSC	UTIB0003140	

Bank Name	Axis Bank
Branch	Mangalbari Branch, Malda
Account Type	Savings Account

Mandatorily/must keep receipt of your online transfer/transaction along with the UTR No. and Transaction ID whichever available or both. Respective UTR No. and Transaction ID of your payment are to be provided to us by following Google link and send respective receipt copy to above e-mail ID (department-wise).

https://forms.gle/4yLcNwefgJpC92ws6

Online transfer can be made from (i) candidate/parents/guardian/relative's bank account, please take print/make pdf file of your transaction/payment or (ii) through any bank, please take receipt from bank and collect UTR No. & Transaction ID of your payment from bank.

OR

(B) Payment by Demand Draft (DD)

In case of non-availability of online transfer facility, prepare a Demand Draft (DD) of the above mentioned amount drawn in favour of **Ghani Khan Choudhury Institute of Engineering and Technology** payable at **Malda.** Send a scan copy of your Demand Draft (DD) in the above e-mail ID (department-wise) as a file to be named as

department_yourfullname_GENRank_DD.pdf or department_yourfullname_GENRank_DD.jpg

Name of the candidate should be written in pencil at the back side of DD and then, send your Demand Draft (DD) by post to our Institute Officer:

OSD (Acad & Exam)/Academic Coordinator

Academic Section

Ghani Khan Choudhury Institute of Engineering and Technology Narayapur, Malda, West Bengal-732141

In case of Demand Draft, your admission may be confirmed after receiving your Demand Draft only. This method will take longer time in confirming your payment. Hence, unless absolute necessity, please avoid paying your fee by the Demand Draft.

(5) Confirmation of your provisional admission (B. Tech in A. Y. of 2020-21)

After receiving the receipt, UTR No. and Transaction ID of your online payment or Demand Draft, concerned officers/Finance Section will check respective payment status. On successful payment only, concerned departmental officers will confirm your provisional admission in B.Tech program of this Institute.

(6) Submission of hard copies of necessary documents

Send hard copy of the application with all originals as per Sl. No. 2(i, v, xii, xvii, xviii, xix, xx) and self attested xerox copies for other necessary documents as per the section (2), and *one xerox copy of the whole set* by speed post to *OSD (Acad & Exam)/Academic Coordinator, Academic Section, Ghani Khan Choudhury Institute of Engineering and Technology, Narayapur, Malda, West Bengal-732141* or by physically in the office/Academic Section of our Institute by the last week of November, 2020/as per the affiliating University/before registration under the affiliating University. Your final

admission will be confirmed only after receiving all of the necessary/required documents as per the Institute / affiliating University.

(7) Hostel Facility

The hostel facility inside campus of the Institute is under construction and hence, Institute is unable to provide such facility at present. However, it will be available after the completion of construction in due course of time. It is likely to take at least one year. In case of female students, a 50 seated hostel facility is available, that to be allotted 'First Come First Served' basis. Accordingly, additional hostel fee will be collected by the Institute in physical presence of the students. Students interested in availing hostel facilities should visit https://www.gkciet.ac.in/uploads/1/2020-09/notification-hostel.pdf and fill relevant forms uploaded in the link.

Please follow our Institute website at www.gkciet.ac.in for any update regarding your admission/registration in B.Tech programs of this Institute.

This issues with approval of the competent authority.

Sd/(Dr. Koushik Paul)

Member Secretary/ Registration & Admission Committee-2020

Copy to: Director, GKCIET, Malda for kind information please

OBC-NCL Certificate Format

FORM OF CERTIFICATE TO BE PRODUCED BY OTHER BACKWARD CLASSES (NCL) APPLYING FOR ADMISSION TO CENTRAL EDUCATIONAL INSTITUTIONS (CEIS), UNDER THE GOVERNMENT OF INDIA

This is to certify that Shri/Smt./	/Kum* Son/
	of Village/
Town*	District/Division* in the
State/Union Territory	belongs to the
	community that is recognized as a backward class
	of Social Justice and Empowerment's Resolution No.
	dated***
Shri/Smt./Kum.	and/or
	e District/Division of
	State/Union Territory. This is also to certify that he/she
does NOT belong to the persons/section	ons (Creamy Layer) mentioned in Column 3 of the Schedule
to the Government of India, Departm	ent of Personnel & Training O.M. No. 36012/22/93- Estt.
•	odified vide OM No. 36033/3/2004 Estt.(Res.) dated
	/l No. 36033/3/2004-Estt. (Res.) dated 14/10/2008, again
	/2/2013-Estt (Res) dtd. 30/05/2014, and again further
modified vide OM No. 36033/1/2013-Es	tt (Res) dtd. 13/09/2017.
	District Magistrate /
	Deputy Commissioner /
Datad	Any other Competent Authority
Dated:	
Seal	
* Please delete the word(s) whic	h are not applicable.
** As listed in the Annexure (for	FORM-OBC-NCL)
*** The authority issuing the certification Government of India, in which	ficate needs to mention the details of Resolution of a the caste of the candidate is mentioned as OBC.

NOTE:

- (a) The term 'Ordinarily resides' used here will have the same meaning as in Section 20 of the Representation of the People Act, 1950.
- (b) The authorities competent to issue Caste Certificates are indicated below:
 - (i) District Magistrate/ Additional Magistrate/ Collector/ Deputy Commissioner/ Additional Deputy Commissioner/ Deputy Collector/ Ist Class Stipendiary Magistrate/ Sub-Divisional magistrate/ Taluka Magistrate/ Executive Magistrate/ Extra Assistant Commissioner (not below the rank of Ist Class Stipendiary Magistrate).
 - (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

ANNEXURE for FORM-OBC-NCL

Sl. No.	Resolution No.	Date of Notification
1	No.12011/68/93-BCC(C)	13.09.1993
2	No.12011/9/94-BCC	19.10.1994
3	No.12011/7/95-BCC	24.05.1995
4	No.12011/96/94-BCC	09.03.1996
5	No.12011/44/96-BCC	11.12.1996
6	No.12011/13/97-BCC	03.12.1997
7	No.12011/99/94-BCC	11.12.1997
8	No.12011/68/98-BCC	27.10.1999
9	No.12011/88/98-BCC	06.12.1999
10	No.12011/36/99-BCC	04.04.2000
11	No.12011/44/99-BCC	21.09.2000
12	No.12015/9/2000-BCC	06.09.2001
13	No.12011/1/2001-BCC	19.06.2003
14	No.12011/4/2002-BCC	13.01.2004
15	No.12011/9/2004-BCC	16.01.2006
16	No.12011/14/2004-BCC	12.03.2007
17	No.12011/16/2007-BCC	12.10.2007
18	No.12019/6/2005-BCC	30.07.2010
19	No. 12015/2/2007-BCC	18.08.2010
20	No.12015/15/2008-BCC	16.06.2011
21	No.12015/13/2010-BC-II	08.12.2011
22	No.12015/5/2011-BC-II	17.02.2014

Form-II Disability Certificate

(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) (See rule 4)

Recent PP size Attested Photograph (Showing face only) of the person with disability			Dato	
Certificate No.			Date:	
This is to certify that I have care	efully examined	Shri/Smt./Kum.		
son/wife/da	ughter of Shri			
Date of Birth (DD/MM/YY)		Age	years, ma	le/female
Registratio	on No		permanent resident o	of House
No	Ward/Village/ S	treet		
Post Office		District		
State		, whose phot	ograph is affixed above,	and am
satisfied that:				
 he/she is a case of: locomotor disability blindness (Please tick as applicable the diagnosis in his/her cas 	•			
3. He/ She has	% (in figure)_			
(in words) permanent phys (part of body) as per guidel	•		ation to his/her	
4. The applicant has submitte	•	•	oof of residence:-	
Nature of Documen	t Date of Issue	Details of auth	ority issuing certificate	
(Signature and Seal of Authorised Signature/Thumb impression of the person in whose	Signatory of noti	fied Medical Auth	ority)	

favour disability

is

certificate

issued.

Form-III Disability Certificate (In cases of multiple disabilities)

(NAME AND ADDRESS OF THE MEDICAL AUTHORITY ISSUING THE CERTIFICATE) (See rule 4)

Recent	PP	size
Attested		
Photogra	aph	
(Showin	g	face
only) of	the p	erson
with disa	ability	

Certificate No		Date:	
This is to certify that I	have carefully examined Shri/Smt./Kui	m	
so	on/ wife/daughter of Shri		
Date of	Birth (DD/MM/YY)	Age	years,
male/female	Registration No.		
permanent resident o	f House No	Ward/	Village/Street
	Post Office		District
	State		
whose photograph is:	affixed above and are satisfied 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		

@ - e.g. Left/Right/both arms/legs

- e.g. Single eye/both eyes

£ - e.g. Left/Right/both ears

2.	In the light of the above,	his/her overall permanent p	physical impairment as per guidelines
	(to be specified), is as foll	ows:	
	In figures:	percent	
	In words:		percent
3.	The above condition is pro	ogressive/ non-progressive/	likely to improve/ not likely to
	improve.		
4.	Reassessment of disability (i) not necessary Or (ii) is recommended/afte	•	_ months, and therefore this certificate
		MM/YY)	
5.	The applicant has submitt	ed the following document	as proof of residence:
	Nature of Document	Date of Issue	Details of authority issuing certificate
6.	Signature and seal of the	Medical Authority:	
ı	Name and Seal of Member	Name of Seal of Member	Name and Seal of the Chairperson
i	Signature/Thumb mpression of the person in whose favour disability certificate is ssued.		

Form-IV Disability Certificate

(In cases other than those mentioned in Forms II and III)

(NAME AND ADDRESS OF THE MEDICAL AUTHORITY ISSUING THE CERTIFICATE) (See rule 4)

Recent	PP	size
Attested		
Photogra	aph	
(Showin	g	face
only) of	the p	erson
with disa	ability	

Certificate No		Date:	
This is to certify that I have careful	lly examined Shri/Smt./Kum		
son/ wife/dau	ighter of Shri		
Date of Birth (DD/M	IM/YY)	Age	years,
male/female F	Registration No		
permanent resident of House No.		Ward	/Village/Street
	Post Office		District
	State		,
whose photograph is affixed abov	e, and am satisfied that he/she	is a case of disa	bility.

1. His/her extent of percentage of physical impairment/disability has been evaluated as per guidelines (to be specified) and is 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		

(Please strike out the disabilities which are not applicable.)

@ - e.g. Left/Right/both arms/legs

- e.g. Single eye/both eyes

£ - e.g. Left/Right/both ears

improve.	rogressive/ non-progressiv	ve/ likely to improve/ not likely to
3. Reassessment of disabilia. not necessaryOrb. is recommended/afteshall be valid till (DD)		months, and therefore this certificat
4. The applicant has submit	ted the following docume	ent as proof of residence:
Nature of Document	Date of Issue	Details of authority issuing certificate
(Authorised Signatory of not (Name and Seal) Countersigned (Countersignature and seal o		rintendent/Head of Government Hospital
	· · · · · · · · · · · · · · · · · · ·	who is not a government servant (with
Signature/Thumb impression of the person in whose favour disability certificate is issued.		
favour disability certificate is issued.	is issued by a medical aut	thority who is not a governmen

Note: 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.

SC/ST Certificate Format

FORM OF CERTIFICATE TO BE PRODUCED BY SCHEDULED CASTES (SC) AND SCHEDULED TRIBES (ST) CANDIDATES

1. 7	This is to certify that Shri/	Shirmati/ Kumari*						son/daughter*
of			of	,	Village/Town*			
Dis	strict/Division*		(of	State/Union Territory*			belongs
to	the	Sche	dule	ed	Caste / Scheduled Tribe	e* under :-		
* The	•		51					
966, th	he State of Himachal Pradesh A	and Scheduled Tribes Lists (Modific ct, 1970, the North Eastern Areas (R luled Castes and Scheduled Tribes (eorg	gar	isation) Act, 1971, the Scheo			
	Constitution (Andaman and Nic	mir) Scheduled Castes Order, 1956; cobar Islands) Scheduled Tribes Ord		95	9, as amended by the Sched	uled Castes and Sch	eduled Tribe	es Order (Amendment) Act,
	•	gar Haveli) Scheduled Castes Ord	er, 1	96	2;			
		r Haveli) Scheduled Tribes Order, 19						
* The	Constitution (Pondicherry) Sch	eduled Castes Order, 1964;						
* The	Constitution (Uttar Pradesh) So	cheduled Tribes Order, 1967;						
* The	Constitution (Goa, Daman and	Diu) Scheduled Castes Order, 1968	;					
	, ,	Diu) Scheduled Tribes Order, 1968;						
	Constitution (Nagaland) Sched							
	Constitution (Sikkim) Schedule							
	Constitution (Sikkim) Schedule	a Tribes Order, 1978; mir) Scheduled Tribes Order, 1989;						
	,	s) Order (Amendment) Act, 1990;						
	,) Order (Amendment) Act, 1991;						
	,) Order (Second Amendment) Act, 1	991.					
	`	,						
. #	This certificate is issue	d on the basis of the Sche	edule	ed	Castes / Scheduled	Tribes* Certifica	te issued	to Shri /Shrimati*
		father/mother* of Sh	nri /	/SI	nrimati /Kumari*			_ of Village/Town*
		in District/E	Divis	io	n*		of the	State State/Union
Terri	tory*	who bel	ong	t	the Caste / Tribe* v	vhich is recogni	sed as a	Scheduled Caste /
Sche	eduled Tribe* in the S	state / Union Territory*			issu	ed by the		dated
3.	Shri/ Shrimati/ Kumari	*			and / or* his / her*	family ordinarily	reside(s)** in Village/Town*
					— Division* of the State Ur	-		·
		01	Suic	ا /ار	Division of the State of	iion remitory or		
						Signa	iture:	
							nation	
ologo:		State/Union Territory*					nation	ith seal of the Office)
	:	State/Union Territory*					nation	
	:	State/Union Territory*					nation	
Oate: Pleas Applic	se delete the word(s) which a						nation	
Pleas Applic MPOR he terr	se delete the word(s) which a cable in the case of SC/ST Per TANT NOTES	re not applicable. sons who have migrated from anoth were will have the same meaning as	er St	tate	»/UТ.	Desigr	nation(w	ith seal of the Office)

3. Revenue Officers not below the rank of Tehsildar.

- 4. Sub-divisional Officer of the area where the candidate and/ or his family normally reside(s).
- 5. Administrator / Secretary to Administrator / Development Officer (Lakshadweep Island).
- 6. Certificate issued by any other authority will be rejected.

Income Certificate

Certified that the TOTAL ANNUA	AL FAMILY INCOME FROM ALL SOURCES of	
GUARDIAN'S NAME	, guardian ofCANDIDATE's I	NAME
residing at	Post Office	
Police Station	in the district of	
in the state of West Bengal for t	the year 2019-2020 is less than Rs	lakhs
(Rupees lakhs and _	thousand only) and stands at	
Rs	(Rupees).
Paste 4 cmx3 cm size recent colour	Candidate's signature	
photograph of the candidate in this box	Candidate must sign here in front of t authority	the certifying
(Candidate's Photograph)		
Signature of Certifying Authority	1	
Designation with Official Seal		
Full Name of Certifying Authority	У	
Office Address		
Office Phone No.	Mobile No:(optional)
ID No:	(optional)	
	nttested by the certifying authority. should preserve a duplicate copy of this Certifica	te.



Ghani Khan Choudhury Institute of Engineering & Technology

(A Centrally Funded Technical Institute (CFTI) established by the Ministry of Education, Govt. of India)

Narayanpur, Malda -732141, West Bengal

APPLICATION FOR ADMISSION/REGISTRATION TO 4-YEAR B. TECH PROGRAMS AT GHANI KHAN CHOUDHURY INSTITUTE OF ENGINEERING & TECHNOLOGY, MALDA THROUGH JoSAA/CSAB -2020 SESSION 2020-21

Name of the Candidate

Affix your recent Passport Size Colour Photograph

(FILL THE FORM IN CAPITAL LETTERS ONLY)

3. Mother's Name	
4. Date of Birth (DD/MM/YYYY)	
5. Gender (M/F) Please Tick (√) Male	Female
6. Nationality	7. State
8. Religion	9. Blood Group
10. Student's contact no.	
11. Student's email ID	
12. Father's /Guardian's contact no.	2070
13. Address	
Full Residential/ Permanent address with P.O., P.S., District, State and PIN	7 CO 1
Correspondence address with P.O., P.S., District, State and PIN	F. F. Salar
Application No:	Roll No.:
Department Allotted:	Rank:

Category, Please Tick ($\sqrt{}$)

The supporting documents are to be submitted, if applied under the category.

(i) GEN	(ii) GEN-PwD	(iii) GEN-EWS
(iv) GEN-EWS-PwD	(v) OBC-NCL	(vi OBC-NCL-PwD
(vii) SC	(viii) SC-PwD	(ix) ST
(x) ST-PwD		

14. Fees Details

An Admission/Registration Fee (for 1st Semester only) of **Rs. 18,620/-** needs to be paid online per candidate. GKCIET, Malda bank details are as under:

A/c holder's name: Ghani Khan Choudhury Institute of Engineering and Technology

Bank and Branch: Axis Bank; Mangalbari Branch, Malda

A/c no. 919010044132909 IFSC Code: UTIB0003140 **Account Type: Savings Account**

Post-payment, please furnish the following details below:

Amount Paid	Pay <mark>ee Bank Name</mark>	UTR No and Transaction Date		
3 7 / /				

In rare cases, if net-banking is not possible, then the fee amount can be paid in the form of a Demand Draft (DD) drawn in the favour of the "Ghani Khan Choudhury Institute of Engineering and Technology" payable at Malda. Name of the candidate should be written in pencil at the back side of DD. Please furnish DD details as under:

Amount	Demand Draft No.	Issuing Bank	Issuing date
50	COM	2011	7

15. Check List/Supporting Documents are to be provided/enclosed

- Scan copies of original documents (or scan copies of self attested documents, in case of xerox/print) are to be submitted through e-mail only for verification and your provisional admission/registration. admission_ee@gkciet.ac.in for Electrical Engineering
 - admission_ft@gkciet.ac.in for Food Technology
 - admission_me@gkciet.ac.in for Mechanical Engineering
- The hard copy of this application along with original documents as per Sl. No. (1, 5, 12,16, 18 and 19) and self attested copies for the rest of necessary documents, and a xerox copy of whole set are to be submitted by Speed Post or physically in the office/Academic Section of this Institute as per notice/ guidelines. Your final admission/registration will be confirmed after receiving all of the necessary documents only.

Sl. No.	Items	(Yes/No)
1.	Payment receipt showing transaction details /DD	

2.	Rank Card/Score Card of JEE (Mains)-2020	
3.	Provisional Seat Allocation Letter issued by the JoSAA/CSAB-2000	
ა.		
4.	Other documents/Confirmation Page of JoSAA/CSAB-2020 counseling	
5.	Migration Certificate (if applicable)	
6.	Admit Card of Secondary or equivalent examination	
7.	Mark-sheet of Secondary or equivalent examination	
8.	Certificate of Secondary or equivalent examination	
9.	Admit Card of H.S. or equivalent examination	
10.	Mark-sheet of H.S. or equivalent examination	
11.	Certificate of H.S. or equivalent examination (if available)	
12.	Address Proof/Domicile Certificate from Competent Authority	
13.	Aadhar Card of the candidate	
14.	Caste Certificate for the candidate under category (SC/ST/OBC) from the competent authority (if applicable). For OBC-NCL and GEN-EWS, certificate should be issued on/after 01.04.2020 as per given format.	
15.	Physically Challenged Certificate# as per given format (if applicable)	7
16.	Physical Fitness/Medical Certificate as per given format	The same of the sa
17.	Income Certificate (optional)	-72
18.	Affidavits for Anti-Ragging by Candidate & Parents	77
19.	School/College Leaving Certificate	
20.	3 copies of recent passport sized colour photographs (write name and D.O.B on back of the photos)	A &
21.	"Yes Upgradation" and "No Upgradation" option form (if available)	1 30

[#] Eligibility of your candidature will be considered as per the norms of Govt. of India

UNDERTAKING

I do hereby declare that the particulars stated by me in this application form are true to the best of my knowledge and belief. I have read the information related to rules and regulations as given in the admission/counselling brochure/institute website. I shall abide by the terms and conditions therein. Further, in the event of suppression or distortion of any fact like category, educational qualifications, nationality, etc. made in my application form, I understand that my candidature is liable for cancellation. I also understand that the decision of the authorities of Institute regarding my admission/registration is final and I shall abide by the decision of the Institution. Further, if admitted, I promise to abide by the academic and disciplinary rules and norms of the Institute/affiliating University/other Governing Bodies such as AICTE and UGC etc, Govt. of India.

I am aware that hostel facilities are not available at this moment, and will abide by the hostel rules and regulations as and when it is provided to me.

Further, I declare that I have provided the correct and authentic information through email and during online verification. If any information given by me in form of digital or hard copy, is found incorrect at any point of time, my admission/candidature will automatically stand CANCELLED without any further reference, and I will also be liable for all the consequences for submitting the false information.

Signature of the Parent/s	Signature of the Candidate

^{*} Application with incomplete details or without necessary documents may be summarily rejected.

Declaration on Migration Certificate

Name:
Father's/Mother's Name:
Village/Locality:
P.O./Street:
P.S./Municipality:
Dist.:
I do hereby declare that I have passed my Higher Secondary Examination/
Equivalent Examination in the year of I have not admitted in any of
the Intuitions/Colleges/Universities etc. for my higher studies during last
year(s). The Institute is liable to cancel my candidature any time, if found such
cases.
Or
I do hereby declare that I have passed my Higher Secondary Examination/
Equivalent Examination in the year of I have admitted in
for my higher studies
(B.Sc/others). I have applied for Migration Certificate which will be submitted
by me within day ofmonth ofyear The Institute is
liable to cancel my candidature any time, if not submitted.
Signature of the Candidate
Signature of Father/Mother/Guardian

PROFORMA

Residential/Domicile Certificate

Certified thatSon/Daughter of					
		has passed / will appear the			
Secondary (Madhyamik)	or equivalent Examin	ation in the yearfrom the			
Institute		It is also			
certified that the car	ndidate is a residen	nt /permanent resident of Village/House			
No	Street	Post Office			
	Police Station	in the District of			
	under	Assembly Constituency			
and has been living in the	State of	continuously			
/ uninterruptedly for the l	ast	years.			
Paste a good quality recent passport size colour photograph of size 4.5 cmX 3.5	Paste a good quality recent passport size colour photograph of size 4.5 cmX 3.5	(Candidate must sign within the above box in front of Certifying Authority)			
cm within the box	cm within the box				
(candidate's photograph)	(Father's/Mother's photograph)	(Candidate's Father/Mother must sign within above box in front of Certifying Authority)			
Signature of the Certifying	g Authority with date:				
Name of the Certifying A	uthority:				
Designation with Office S	eal of the Certifying Au	thority:			
Office Phone No:					

Note: (i) Photographs are to be attested by the Certifying Authority

(ii) The Certifying Authority should preserve a duplicate copy of the Certificate

FORM-GEN-EWS

INCOME & ASSET CERTIFICATE TO BE PRODUCED BY ECONOMICALLY WEAKER SECTIONS

Certificate No				Date:		
	VALII	D FOI	R THE A	DMIS	SION IN ACADEM	IIC YEAR <u>2020-2021</u>
1.	This is	to	certify	that	Shri/Smt./Kumari	
son	/daughter/wife	of				permanent resident of Post Office the State/Union Territory
			,	Villag	ge/Street	Post Office the State/Union Territory
-]	District		in	the State/Union Territory
			III Code_		whose photog	graph in attested below belongs to ne* of his/her "family"** is below
Rs.	•	Eight	Lakh on	ly) for	the financial year	His/her family does not
		l flat o l plot o l plot o	of 1000 sq of 100 sq	q. ft. an _I . yards	d above; and above in notifie	d municipalities; ther than the notified
2. not						gs to thecaste which is Backward Classes (Central List).
Г			\neg			al of Officer
						Designation
	Recent Passpor attested photog of the applic	graph			ould be required to	s of the families as mentioned be certified by an officer not Tehsildar in the States/UTs.

^{*} Note1: Income covered all sources i.e. salary, agricultural, business, profession, etc.

^{**} Note2: 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.

^{***} Note3: 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.

MEDICAL CERTIFICATE (to be issued by a Registered Medical Practitioner)

GENERAL EXPECTATIONS

Candidates should have good general physique. In particular,

- . Chest measurement should not be less than 70 cm, with satisfactory limits of expansion and contraction.
- . Vision should be normal. In case of defective vision, it should be corrected to 6/9 in both eyes or 6/6 in the better eye. Colour blind and uniocular (having vision in only one eye)persons are restricted from admission to certain courses.
- . Hearing should be normal. Defective hearing should be corrected.
- . Heart and lungs should not have any abnormality and there should be no history of mental illness and epileptic fits.

, ,							
1	Name of the candidat	e:					
2	Identification Mark (a mole, scar or birthmark), if any						
3	Major illness/operation, if any (specify nature of illness/operation)						
4	Height in cm:	leight in cm: Weight in kg: Blood Group:				p:	
5	Past History	(a) Mental illness (b) Epileptic Fit					
6	Chest (a) Inspiration i	n cm		(b) Exp	oiration in cm		
7	Hearing						
8	Vision with or Right Eye without glasses:		ye	Left Eye	Colour Blindness	Uniocular vision(having vision in only one eye)	
9	Respiratory System						
10	Nervous System						
11	Heart (a)Sour	nds		(b) Murm	ur		
12	Abdomen Hernia (a) Liver (b) Spleen		Hernia		Нус	drocele	
13	Any other defects:						
	admission to I The candidate	Engineer does no	ne prescribe ing/Archite ot fulfil the	cture/ Pharma prescribed sta		ess/medical fitness	
	Name of the Doctor	Si	gnature	Registration	on number	Seal	

Stamp Paper of Rs. 10/-

ANNEXURE-VI AFFIDAVIT BY THE STUDENT

I,			(full na	me of student)
I,s/o d/o Mr./Mrs./Ms			`	<u> </u>
having been admitted to Ghan	i Khan Choudhury Ins	titute of Engineer	ring & Technolog	y, Malda have
received a copy of the UGC	Regulations on Curbin	ig the Menace of	Ragging in High	er Educational
Institutions, 2009, (hereinaft	er called the "Regula	tions") carefully	read and fully u	understood the
provisions contained in the sai				
 I have, in particular, pragging. 	perused clause 3 of the	Regulations and a	am aware as to w	hat constitutes
2) I have also, in particula the penal and administ	ar, perused clause 7 and rative action that is liabl actively or passively, or	e to be taken agair	nst me, in case, I a	m found guilty
3) I hereby solemnly aver	and undertake that			
 a) I will not indulge in the Regulations. 	n any behaviour or act th	nat may be constitu	ated as ragging un	der clause 3 of
b) I will not participa	te in or abet or propaga as ragging under clause			r omission that
under any penal law or 5) I hereby declare that I	found guilty of ragging, thout prejudice to any of any law for the time being have not been expelled of being found guilty of,	other criminal action ng in force. or debarred from a	on that may be tal	ken against me
	firm that, in case the de			
Declared this	day of	month of	year.	
	•	re of the Deponent	:	
	Name:			
	Address	3:		
	Phone I	No. / Cell No.		
Verified that the contents of the is false and nothing has been c		e best of my know	ledge and no part o	of the affidavit
Verified at			(month),	(year).
	Signatur	e of Deponent:		
Solemnly affirmed and(month),	signed in my prese (year) after reading the			y) of

Note: It is mandatory to submit this affidavit in the above format, if you desire to register for the academic session.

OATH COMMISSIONER:

Stamp Paper of Rs. 10/-

ANNEXURE VII AFFIDAVIT BY PARENT / GUARDIAN

I, Mr./Mr	rs./Ms		(full name of parent/guardian
father/mo	other/guardian of		
	•		dhury Institute of Engineering &
		1.	Curbing the Menace of Ragging ir
			ulations"), carefully read and fully
	od the provisions contained in t	<u>e</u>	
1)		clause 3 of the Regulations and	l am aware as to what constitutes
	ragging.		
2)	<u> </u>		the Regulations and am fully aware
			en against my ward in case he/she is
		gging, actively or passively, or	being part of a conspiracy to
•	promote ragging.		
3)	I hereby solemnly aver and un		
	a) My ward will not indulg clause 3 of the Regulation	-	may be constituted as ragging under
	b) My ward will not partic	ipate in or abet or propagate th	rough any act of commission or
	omission that may be co	onstituted as ragging under clau	use 3 of the Regulations.
4)	<u> </u>		liable for punishment according to
		- · ·	er criminal action that may be taker
	•	enal law or any law for the time	_
5)			r debarred from admission in any
			lty of abetting or being part of a
	1 1 1	•	case the declaration is found to be
	untrue, the admission of my v	vard is liable to be cancelled.	
	Declared thisday of	month of	year.
		Signature of Deponent:	
		Name:	
		Address:	
		Telephone/ Mobile No.:	
		VERIFICATION	
Verified 1	that the contents of this affiday		owledge and no part of the affidavit
	nd nothing has been concealed	•	owledge and no part of the arridavit
			(month),(year).
v crimea v	(prace) (// tims the(day) 01	(year).
		Signature of Deponent:	
Solemnly	affirmed and signed	in my presence on this	s the (day) of
	9	after reading the contents of the	` ` • • • • • • • • • • • • • • • •
	· — · · · · · · · · · · · · · · · · · ·	-	

OATH COMMISSIONER:

Note: It is mandatory to submit this affidavit in the above format, if you desire to register for the academic session.

Ghani Khan Choudhury Institute of Engineering & Technology

(A Centrally Funded Technical Institute established by the Ministry of Education, Govt. of India.)

Narayanpur, Malda, Pin -732141, West Bengal

B. Tech Fees Structure for the Session of 2020-21

Description	Fees under	Fees	Remarks	Fees/1st	Fees/Odd	Fees/Even
	GKCIET	under		Semester	Semester except	Semester
	(Rs.)	MAKAUT (Rs.)			1 st Semester	
		(NS.)				
Caution Money	5,000/-	-	1st Semester/Refundable	5,000/-	-	-
Admission Fee	500/-	-	Each odd Semester	500/-	500/-	-
Registration Fee	-	500/-	1 st Semester	500/-	-	-
Development Fee	-	2200/-	1 st Semester	2,200/-	-	-
			(Rs. 550/- per year)			
Student's	120/-	-	Each odd Semester	120/-	120/-	-
Insurance						
Medical Fee	150/-	-	Each Semester	150/-	150/-	150/-
Tuition Fee*	1,500/-	-	Each Semester	1,500/-	1,500/-	1,500/-
Session Charge	2,500/-	-	Each Semester	2,500/-	2,500/-	2,500/-
Examination Fee	300/-	1200/-	Each Semester	1,500/-	1,500/-	1,500/-
Institute I-Card	50/-	-	1 st Semester	50/-	-	-
Library I-Card	50/-	-	1 st Semester	50/-	-	-
Library/Magazine	400/-	-	Each Semester	400/-	400/-	400/-
/others						
Book Bank	400/-	-	1 st Semester	400/-	-	-
Students	1,750/-	-	1 st Semester	1,750/-	-	-
Welfare/Sports/						
ExtraCurricular						
Activities						
T&P Activity	1,000/-	-	1 st Semester	1,000/-	-	-
Fund						
Overhead	1,000/-	-	Each Semester	1,000/-	1,000/-	1,000/-
Charges						
Other Fees	As Applicable					
Total				18,620/-	7,670/-	7,050/-

^{*}Exempted for the candidates under the TFW scheme.

N. B.: Hostel accommodation is not available at present. However, the hostel facility at the campus will be available after construction of such facility. It is likely to take at least one year. In case of girls' students, a 50 seated hostel facility is available, that to be allotted 'First Come First Served' basis.