

Ghani Khan Choudhury Institute of Engineering and Technology (A CFTI under the Ministry of Education, Govt. of India) Narayanpur, Malda -732141, West Bengal

Date: 11-07-2025

Memo No. GKCIET/Acad./01/2025/129

Notification/Guidelines Admission/Registration in B.Tech Programs through JoSAA/CSAB-2025 Counseling for Academic Year of 2025-26

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 A.Y. of 2025-26, our Institute is offering AICTE approved B. Tech programs (4 years duration) in (i) **Electrical Engineering**, (ii) **Food Technology**, (iii) **Mechanical Engineering**, (iv) **Computer Science and Engineering (Artificial Intelligence and Machine Learning)**, (v) **Civil and Environmental Engineering** affiliated to Maulana Abul Kalam Azad University of Technology (MAKAUT), W.B.

The admission criteria are:

- (a) Secured a rank in JEE Main-2025
- (b) Class XII marks criteria and guidelines as articulated in **Annexure 2(b) page numbers 83 of** "**Business Rules for Joint Seat Allocation**" for the Academic Programs offered by the IITs, NITs, IIEST, IIITs and Other-GFTIs for the academic year 2025-26, available at https://josaa.nic.in/under/Information menu.

For admission to B. Tech programs in GKCIET, Malda, as per guidelines in **11(ii)** page numbers **10-11** of "Business Rules for Joint Seat Allocation" '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 and Tripura. Department specific subject combination for 12th standard (10+2) as per guideline of AICTE/JOSSA-CSAB/MAKAUT to be followed for admission in the Institute.

Students may send their queries in following department-wise e-mail IDs:

Civil Engineering	kiran@gkciet.ac.in
Computer Science & Engineering	babul@gkciet.ac.in
Electrical Engineering	surajit@gkciet.ac.in
Food Engineering and Technology	kshirod@gkciet.ac.in
Mechanical Engineering	nitesh@gkciet.ac.in
Dean (Acad., P & D)	dean_apd@gkciet.ac.in

Students may also contact the following officials for any **emergency clarification** during office hours; otherwise, emails should be the preferred mode of contact:

Name	Department / Section	Mobile
Prof. Kiran Yarrakula	Civil Engineering	8220584487
Head of Department		
Dr. Babul Prasad Tewari	Computer Science and Engineering	6297479700
Head of Department		
Dr. Surajit Chattapadhyay	Electrical Engineering	9735353700
Head of Department		
Prof. Kshirod Kumar Dash	Food Engineering and Technology	7866931516
Head of Department		
Dr. Nitesh Mandal	Mechanical Engineering	9062722980
Head of Department		
Dr. Koushik Paul	Academic Section	7866931508
Dean(Acad., P&D)		

(1) Submission of following documents physically during admission:

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 <i>Disciplinary Rules & Regulation for Students of this Institute</i>
(i)	and UGC Anti-ragging Regulations 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)
(ii)	Copy of Rank Card/Score Card of JEE Mains -2025
(11)	(Self Attested in case of Xerox/Print Copy)
(iii)	Copy of Provisional Seat Allocation Letter issued by the JoSAA/CSAB-2025.
(111)	(Self Attested in case of Xerox/Print Copy)
(iv)	Copy of any other documents issued by the JoSAA/CSAB-2025.
(10)	(Original or Self Attested in case of Xerox/Print Copy)
	Migration Certificate (for such candidate who passed their qualifying exam before the year of
	2024 and/or had admitted for their higher study in any Institute/College/ University etc.) or
(v)	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). (For declaration format, please see Annexure-II)
	(Original document only)
(vi)	Copy of Admit Card of Secondary or equivalent examination.
(**)	(Self Attested in case of Xerox/Print Copy)
(vii)	Copy of Mark-sheet of Secondary or equivalent examination
(111)	(Self Attested in case of Xerox/Print Copy)
(viii)	Copy of Certificate of Secondary or equivalent examination.
(****)	(Self Attested in case of Xerox/Print Copy)
(ix)	Copy of Admit Card of H.S. or equivalent examination
(44)	(Self Attested in case of Xerox/Print Copy)
(x)	Copy of Mark-sheet of H.S. or equivalent examination
(^)	(Self Attested in case of Xerox/Print Copy)

(xi) Copy of Certificate of H.S. or equivalent examination (Scan Copy of the Original or Self Attested in case of Xerox/Print Copy) (xii) Address Proof/Domicile Certificate from the Competent Authority (Original document) (as per Annexure III) (xiii) Copy of Aadhar Card of the Candidate (Self Attested in case of Xerox/Print Copy) (xiv) Copy of Caste Certificate issued by the competent authority for candidates those are allotted under category of SC/ST/OBC-NCL (as per Annexure IV). For OBC-NCL and GEN-EWS certificate should be issued on/after 01.04.2025. (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 (as per Annexure V). (Self Attested in case of Xerox/Print Copy) (xvi) Physical Fitness Certificate of Candidate (as per Annexure-VI) (Original document) (xvii) Anti-Ragging Affidavit by Candidate on a Stamp Paper of Rs. 10/- as per format of Annexure-VII (Optional). Printout of online document is mandatory. (xxii) Anti-Ragging by Parents in a Stamp Paper of Rs. 10/- as per format of Annexure-VIII (Optional). Printout of online document is mandatory. (xxii) 3 copies of a recent passport sized colour photograph (xxi) School/College Leaving Certificate (in original) (xxii) JEE Mains Yes/No Up-gradation form, if any. Affidavit (Rs. 10/- stamp paper) as per format of Annexure-IX Original document <th< th=""><th></th><th></th></th<>		
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Information Brochure format (Annexure-X). Original document	(xxiii)	
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(Wherever self-attested copies are being submitted, students must show original documents to the verifying officer)

The admission fee has to be paid only after departmental faculty verifies and accepts your documents.

(2) Payment of Fees (for 1st Semester / 3rd Semester-Lateral Entry only)

Only after successful verification of all documents, an admission / registration fee (for 1st Semester / 3rd Semester-Lateral Entry only) of **Rs. 35,541/- (Rs. 31,548/- for TFW Allotted Candidates)** is to be paid for admission. Fee Structure for B. Tech program of 4 years duration is enclosed as **Annexure-XI**. (Other fees, if any as per the Institute/affiliating University, will be collected after your admission, and your seat acceptance fee paid to JoSSA/CSAB will be refunded as and when JoSSA/CSAB sends it to us)

The payment can be made through GKCIET Payment link from GKCIET official website https://www.qkciet.ac.in

Student must keep receipt of 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.

https://forms.gle/r5cryVsL2ryfLexa9

(3) Confirmation of your provisional admission (B. Tech in the A. Y. of 2025-26)

After receiving the receipt, UTR No. and Transaction ID of your online payment, 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.

(4) Submission of hard copies of necessary documents

(5) Hostel Facility

Hostel rooms are not guaranteed. However, the Institute at its own discretion may allocate hostel rooms to the students. An amount of Rs. 6,000/- per semester per student (mess charges extra) will be collected as room rent when hostels become operational.

To know more about hostels and hostel fees, students may visit Institute website>Facilities>Hostel or Institute website>Academics>Tuition and Hostel Fees.

(6) Cancellation of admission and refund rules

Cancellation of admission is possible only till the last date of MAKAUT online registration (last date of registration will be notified in www.makautwb.ac.in>Notices); however, the process will be initiated only after submission of hardcopy application by the student. For any possible refunds, suitable notice will be uploaded on the Institute website in due course of time.

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) **Dean (Acad., P & D)**

Ghani Khan Choudhury Institute of Engineering and Technology

(A Centrally Funded Technical Institute under the Ministry of Education, Govt. of India)
(Affiliated to WBSCT&VE&SD [TET&SD] & MAKAUT, Govt. of West Bengal)
Narayanpur, Malda - 732141, West Bengal

www.gkciet.ac.in

Roll No:/B.Tech/2025-26//	Roll No:	/B.Tech/2025-26//
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Application for admission/registration to 4-year B. Tech program at Ghani Khan Choudhury Institute of Engineering & Technology, Malda through JoSAA/CSAB -2025

SESSION 2025-26

न हि ज्ञानेन सदृशं पवित्रमिह विद्यते

recent Passport Size Colour Photograph

Affix your

(FILL THE FORM IN CAPITAL LETTERS ONLY)

1.	Name of the Candidate			7	RIN	
2.	Father's Name	C.C.				
3.	Mother's Name	2 1/7 (**)	Fig. and			
4.	Date of Birth (DD/MM/YYYY)	GIVE	ET		3	
5.	Gender (M/F/T) Please Tick ($$)	Male	Fem	ale	Third Gender	Ó
6.	Nationality			7. State		6
8.	Religion			9. Blood Gr	oup	9
10.	Student's contact no.	71	,			
11.	Student's email ID		P /			*
12.	Father's /Guardian's contact no. (Must)	TRE				DIA
2	Address					
13.	Full Residential/ Permanent address with P.O., P.S., District, State and PIN	<i>€</i> 57D.:	2010		70.5	
	Parent's address with P.O., P.S., District, State and PIN (Must)				¥ GO	
14.		https://forms.gle Student must			l form after admis	sion.
App	lication No:			Roll No.:		
Dep	artment Allotted:			Rank:		

15. 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	(xi) TFW	

16.Fees Details

An admission / registration fee (for 1st Semester / 3rd Semester-Lateral Entry only) of Rs. 35,541/- (Rs. 31,548/- for TFW Allotted Candidates) needs to be paid online per candidate.

The payment can be made through GKCIET Payment link from GKCIET official website https://www.gkciet.ac.in

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

a. Original documents / two sets of self-attested photocopied documents are to be submitted physically for your provisional admission/registration. Queries can be sent to:

kiran@gkciet.ac.in	for Civil Engineering
babul@gkciet.ac.in	f <mark>or Computer Scie</mark> nce & Engineering
surajit@gkciet.ac.in	for Electrical Engineering
nitesh@gkciet.ac.in	for Mechanical Engineering
kshirod@gkciet.ac.in	for Food Engineering and Technology

b. The hard copy of this application along with the following original documents as per Sl. No. (1, 5, 12, 16, 18, 19 and 22) and self-attested copies for the rest of necessary documents, and a xerox copy of whole set are to be submitted 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 /Receipt	
2.	Rank Card/Score Card of JEE MAIN 2025	
3.	Provisional Seat Allocation Letter issued by the JOSAA / CSAB-2025	
4.	Other documents/confirmation page of JOSAA / CSAB-2025 counseling	
5.	Migration Certificate (if applicable) / Declaration regarding Migration Certificate on Stamp Paper. (as per Annexure-II)	
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	
12.	Address Proof/Domicile Certificate from Competent Authority (as per Annexure III)	
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 01.04.2025. (as per Annexure IV)	

15.	Physically Challenged Certificate# as per given format (if applicable)
	(as per Annexure V)
16.	Physical Fitness/Medical Certificate as per given format (as per Annexure VI)
17.	Affidavits for Anti-Ragging by Candidate & Parents (printout and Signature of
	online documents mandatory)
	(https://www.antiragging.in/affidavit standalone form.php)
18.	Anti-Ragging by Parents in a Stamp Paper of Rs. 10/- as per format of
	Annexure-VIII (Optional). Printout of online document is mandatory.
19.	3 copies of recent passport sized colour photographs (write name and
	D.O.B on back of the photos)
20.	School/College Leaving Certificate (in original)
21.	"Yes Upgradation" and "No Upgradation" option form (if available)
22.	Affidavit on Rs. 10/- stamp paper by student (as per Annexure-IX)
23.	Income Certificate (for FY 2024-25) for GEN EWS-allotted candidates as per
	JOSAA / CSAB Information Brochure format. (Annexure X)

[#] 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 have also read Disciplinary Rules for students given in the Institute website under Student Zone and will abide them.

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 e- mail 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.

Anti-ragging Undertaking Reference No.	(
Signed on//2025	

Signature of the Parent/s

Signature of the Candidate



Importance Information for the students

This is a ragging free Campus. Names of the Anti-Ragging Committee members and Name of the Anti-Ragging Squad members are given in the Institute website under the category of Information Centre < https://www.gkciet.ac.in/facility/Anti-Ragging>.

Student also are advised to go through ragging related circulars (UGC regulations on Curbing the Menace of Ragging in Higher Education Institutions 2009 and its subsequently amendments) given on UGC website.

The Institute follows Central Govt/AICTE guideline pertaining to "Sexual Harassment of Women at Workplace (Prevention, Prohibition and Redressal) Act 2013 and stakeholders may visit Institute website>Information Centre>ICC section (https://www.gkciet.ac.in/facility/icc) in this regard. Name of Members and contact details of Internal Complaint Committee are uploaded there.

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

To be executed on Stamp Paper

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 got 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 of month of The Institute is liable to cancel my candidature any time, if not submitted.
Signature of the Candidate

Signature of Father/Mother/Guardian

APPENDIX-1 PROFORMA a1

Residential/Domicile Certificate for candidates residing in the State of West Bengal continuously for at least the last ten (10) years as of 31.12.2024

Son/ daughter of				
resident/permanent resionstresionstreet				
In the District				
Constituency and has bee				_
at least for the last ten (10	_		0 11 11 11 11	- y,
Paste a 4 cmx3 cm size recephotograph of the candid box. The photo must be a the certifying authority.	ate in this			
	Can	didate's signatu	ıre	
(Candidate's Photograph	- 41	didate must s iority.	sign here in from	nt of the certifying
		J		
Signature of Certifying Au	th onity			
	_			
Full Name of Certifying A				
Designation with Official				
Office Address Office Phone No				(optional)
ID No:				(opuonar)

Note: Photographs are to be attested by the certifying authority. The Certifying Authority may preserve a duplicate copy of this Certificate as a record.

APPENDIX-2 PROFORMA-a2

Residential/Domicile Certificate for candidates residing in the State of West Bengal continuously for at least the last ten (10) years as of 31.12.2024

Certified that	son/daughter of
	has passed the '10+2' Examination
in theyear/ will	appear in the Final '10+2' Examination in 2025 from this
Institution.	
It is also certified that the stude	nt is a resident/permanent resident of West Bengal at
Village/House No	StreetPost Office
Police Station	in the district of
under	Assembly Constituency and has been living and
studying in the State of West Benga	l continuously / uninterruptedly, at least for the last ten (10)
years as of 31-12-2024.	
Paste a 4 cmx3 cm size recent colour photograph of the candidate in this box. The photo must be attested by the certifying authority.	
	Candidate's signature
	Candidate must sign here in front of the certifying
(Candidate's Photograph)	authority.
Signature of Certifying Authority	
	Block Letter)
Designation with Official Seal	block detter j
	Mobile No: (optional):
ID No: (optional):	
	contifuing outhority. The Contifuing Authority may present a displicate copy of this

Note: Photographs are to be attested by the certifying authority. The Certifying Authority may preserve a duplicate copy of this Certificate as a record.

APPENDIX-3 PROFORMA b

Residential/Domicile Certificate for candidates not residing in the State of West Bengal but whose parent(s) is (are) permanent resident(s) of West Bengal having their permanent home address within West Bengal

Certified that		
Father/mother of		(the
applicant) is a permanent	Resident of West Bengal	at Village/House No. /Street
Post (OfficePolice	e Station
In the District of	Under	Assembly
Constituency		
Paste a 4 cmx3 cm size recent colour photograph of the candidate in this box. The photo must be attested by the certifying authority.	Paste a 4 cmx3 cm size recent colourphotograph of the father/ mother ofthe candidate in this box. The photo must be attested by the certifying authority.	Candidate's Signature
(Candidate's Photograph)	(Father's/ Mother's Photograph)	Father's/ Mother's Signature
		Candidate must sign here in front of the certifying authority.
Signature of Certifying Author	ity	
Full Name of Certifying Author	rity (Block Letter)	
Designation with Official Seal		
Office Address		
Office Phone No	Mobile No:	(optional)
ID No:	(opt	ional)
	by the certifying authority. The Certifying Auth	hority may preserve a duplicate copy of this

Note: Photographs are to be attested by the certifying authority. The Certifying Authority may preserve a duplicate copy of this Certificate as a record.

FORM-OBC-NCL

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/
Daughter** of Shri/Smt.**	
Town**	_District/Division** in
the State/Union Territory	
commu under Government of India***, Ministry of Socia dated	Justice and Empowerment's Resolution No.
Shri/Smt./Kum.	
his/her family ordinarily reside(s) in the	District/Division
of the State/U	
he/she does NOT belong to the persons/sections	(Creamy Layer) mentioned in Column 3 of the
Schedule to the Government of India, Depar	tment of Personnel & Training O.M. No.
36012/22/93- Estt. (SCT) dated 08/09/93 which	n is modified vide OM No. 36033/3/2004
Estt.(Res.) dated 09/03/2004, further modified v	ide OM No. 36033/3/2004-Estt. (Res.) dated
14/10/2008, again further modified vide OM No.	36036/2/2013-Estt (Res) dtd. 30/05/2014, and
again further modified vide OM No. 36033/1/2013	-Estt (Res) dtd. 13/09/2017.
	District Magistrate / Deputy Commissioner /
	Any other Competent Authority
Dated:	•
Seal	
•	es and updates on the Central List of State-wise OBCs.
** Please delete the word(s) which are not ap *** As listed in the Annexure (for FORM-OB The authority issuing the certificate needs Government of India, in which the caste o	Ĉ-NCL) to mention the details of Resolution of

- **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
 - (v) Certificate issued by any other authority will be rejected

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
23	No. 12011/04/2014-BC-II	14.01.2015
24	No. 12011/7/2014-BC-II	23.01.2015
25	No. 12011/1/2015-BC-II	27.05.2015
26	No. 12015/05/2011-BC-II	14.07.2015
27	No. 12011/06/2014-BC-II	09.09.2015
28	No. 12011/13/2016-BC-II	25.05.2016
29	No. 12011/14/2016-BC-II	13.06.2016
30	No. 12011/15/2016-BC-II	30.06.2016
31	No. 12011/4/2014-BC-II	11.08.2016
32	No. 12011/6/2014-BC-II	06.12.2016
33	No. 12011/13/2016-BC-II	22.12.2016
34	No. 20012/1/2017-BC-II	18.01.2017
35	No. 12011/7/2017-BC-II	28.07.2017
36	No. 36033/1/2013-Estt. (Res.)	13.09.2017
37	No. 36033/2/2018-Estt. (Res.)	08.06.2018

SC/ST Certificate Format

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

1. This is to certify that Shri/	Shrimati/ Kuma	ri*	. ,			son/da	aughtei	r* of
		of V	illage/Town*			Distric	ct/Divi	sion*
	of	State/Union	Territory*			belongs	to	the
		aste / Scheduled	-					
		asic / Scheduled	Thoc under					
* The Constitution (Scheduled Castes) Ord								
* The Constitution (Scheduled Tribes) Ord		1 4074						
* The Constitution (Scheduled Castes) (
* The Constitution (Scheduled Tribes) (Un	nion Territories) Ordei	r, 1951						
As amended by the Scheduled Castes and Sc Iimachal Pradesh Act, 1970, the North Easte nd Scheduled Tribes Orders (Amendment) A	rn Areas (Reorganisat							
* The Constitution (Jammu and Kashr	,							
* The Constitution (Andaman and Nic	cobar Islands) Sche	duled Tribes Orde	er, 1959, as amende	d by the Scheduled Ca	astes and Scheduled	Tribes Orde	er (Am	endment)
Act, 1976;								
* The Constitution (Dadra and Nagar								
* The Constitution (Dadra and Nagar			52;					
* The Constitution (Pondicherry) Scho								
* The Constitution (Uttar Pradesh) Sci								
* The Constitution (Goa, Daman and I	,							
* The Constitution (Goa, Daman and I	,							
* The Constitution (Nagaland) Schedu								
* The Constitution (Sikkim) Schedule								
* The Constitution (Sikkim) Schedule								
* The Constitution (Jammu and Kashi	*							
* The Constitution (Scheduled Castes)								
* The Constitution (Scheduled Tribes)	,							
* The Constitution (Scheduled Tribes)	Order (Second An	nendment) Act, 1	991.					
2. # This certificate is issued or	n the basis of th	e Scheduled C	astes / Scheduled	Tribes* Certificate	e issued to Shri /	Shrimati*		
							•	
		District/Division			of the			/Union
Territory*						Scheduled	i I ribe	" in the
State / Union Territory*	i	issued by the		dated	·			
3. Shri/ Shrimati/ Kumari	*		and / or	* his / her* family	ordinarily reside	(s)** in V	illage/	Town*
	of	Distri	ct/Division* of the	e State Union Territo	ory* of			
					Signature:			
					Designation .			
						(With seal		
Place:	State/Union Territo	ory*				(,
Date:								
Please delete the word(s) which a								
* Applicable in the case of SC/ST	Persons who hav	e migrated fron	n another State/U	T.				
MPORTANT NOTES								

The term "ordinarily reside(s)**" used here will have the same meaning as in Section 20 of the Representation of the People Act, 1950. Officers competent to issue Caste/Tribe certificates:

- District Magistrate / Additional District Magistrate / Collector / Deputy Commissioner / Additional Deputy Commissioner / Deputy Collector / Ist Class Stipendiary Magistrate / City Magistrate / Sub-Divisional Magistrate / Taluka Magistrate / Executive Magistrate / Extra Assistant Commissioner.
- Chief Presidency Magistrate / Additional Chief Presidency Magistrate / Presidency Magistrate.
- Revenue Officers not below the rank of Tehsildar.
- Sub-divisional Officer of the area where the candidate and/ or his family normally reside(s).
- Administrator / Secretary to Administrator / Development Officer (Lakshadweep Island).
- Certificate issued by any other authority will be rejected.

FORM-PwD (II)

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)

			attested photogi (showin	raph ng face f the person
Certificate No			Date:	
This is to certify that I have care	fully examined			
Shri/Smt./Kum				
son/wife/dau	ghter of Shri			Date of
Birth (DD/MM/YY)				
Registration	n No		permanent resident o	of House No.
Wan				
Post Office				
 he/she is a case of: a. locomotor disability b. blindness (Please tick as applicable) the diagnosis in his/her case He/ She has	is	blindness in r fied). locument as p	elation to his/her	percent
Nature of Document	Date of Issue	Details of au	uthority issuing certifica	ite
(Signature and Seal of Authorised S			uthority)	

Signature/Thumb impression of the person in whose favour disability certificate is 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 photograph (showing face only) of the person with disability

Certificate No			Date:
This is to certify that I have carefully	examined		
Shri/Smt./Kum			son/ wife/daughter of
Shri			_
Date of Birth (DD/MM/YY)			years,
male/femaleReg	istration No		
permanent resident of House No			Ward/Village/Street
	Post Office		
District	State		
		whose photogr	aph 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	X		
6	Mental-illness	X		

^{@ -} 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 physical impairment as per guidelines (to							
	be specified), is as follows:							
	In figures:	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	y is:						
	(ii) is recommended/after	years /MM/YY)	months, and therefore this certificate					
5.	The applicant has submitt	ed the following document a	as proof of residence:					
	Nature of Document	Date of Issue	Details of authority issuing certificate					
6.	Signature and seal of the	Medical Authority:						
,			N 10 1 04 01 1					
	Name and Seal of Member	Name of Seal of Member	Name and Seal of the Chairperson					
	Signature/Thumb impression whose favour disability cert	•						

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 photograph (showing face only) of the person with disability

Certificate No			Date:
This is	s to certify that I have carefully examined		
Shri/S	mt./Kum		son/ wife/daughter of
Shri			
	of Birth (DD/MM/YY)		.ge years,
	emaleRegistration No		
	nent resident of House No.		
	Post Office		
Distric	etState		
		. whose pho	tograph is affixed above, and am
caticfic	ed that he/she is a case of disability.	-, F	8
	•		
	s/her extent of percentage of physical impairm		
gu	idelines (to be specified) and is shown against	the relevant	disability in the table below:
S. No.	Disability	Diagnosis	Permanent physical impairment / mental disability (in %)
1	Locomotor disability		
2	Visual Impairment (blindness / low vision)		
3	Hearing impairment		
4	Speech and language disability		
5	Intellectual disability		
6	Mental-illness		
7	Disability caused due to chronic		

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

neurological conditions and / or blood disorders

- 2. The above condition is progressive/ non-progressive/ likely to improve/ not likely to improve.
- 3. Reassessment of disability is:

a. not necessaryOr		
b. is recommended/after	years	months, and therefore this certificate
shall be valid till (DD/M	[M/YY)	
4. The applicant has submitted	the following document	nt as proof of residence:
Nature of Document	Date of Issue	Details of authority issuing certificate
(Authorised Signatory of notifie (Name and Seal)	ed Medical Authority)	
		rintendent/Head of Government Hospital, who is not a government servant (with
Signature/Thumb impression o	-	
whose favour disability certific	ate is issued.	

<u>Note:</u> 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.

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					
1	Name of the candidate:			Gender:		
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:	Weig	ht in kg:	Blood Group):	
5	Past History	(a) Mental illness (b) Epileptic Fit	S			
6	Chest (a) Inspiration in cm	1	(b) E	xpiration in cm		
7	Hearing					
8	Vision with or without glasses:	Right Eye	Left Eye	Colour Blindness	Uniocular vision (having vision in only one eye)	
9	Respiratory System				-1	
10	Nervous System					
11	Heart (a) Sour	ids	(b) Murn	nur		
12	Abdomen (a) Liver (b) Spleen		Hernia	Н	lydrocele	
	Any other defects:	•				
			Certificate of Med	ical Fitness		
	The candidate fulfils the prescribed standard physical fitness, medical fitness and is FIT for admission to Engineering/Architecture/ Pharmaceutics/ Science Course. The candidate does not fulfil the prescribed standard of physical fitness/medical fitness and is unfit/temporarily unfit for admission due to following defects:					
	Name of the Doctor	Regn	ı. No	Signature with date	Seal	

Stamp Paper of Rs. 10/-

AFFIDAVIT BY THE STUDENT

	(full name of student)
I,s/o d/o Mr./Mrs./Ms.	(Tun nume of statem)
having been admitted to Ghani Khan Choud	hury Institute of Engineering & Technology, Malda have
	n Curbing the Menace of Ragging in Higher Educational
	"Regulations") carefully read and fully understood the
provisions contained in the said Regulations.	
	3 of the Regulations and am aware as to what constitutes
ragging.	and alarma 0.1 after Descriptions and an fally arranged
the penal and administrative action the	se 7 and clause 9.1 of the Regulations and am fully aware of at is liable to be taken against me, in case, I am found guilty ively, or being part of a conspiracy to promote ragging.
3) I hereby solemnly aver and undertake	
,	r or act that may be constituted as ragging under clause 3 of
	propagate through any act of commission or omission that er clause 3 of the Regulations.
, , , , , , , , , , , , , , , , , , , ,	fragging, I am liable for punishment according to clause 9.1 to any other criminal action that may be taken against me
under any penal law or any law for the	
	expelled or debarred from admission in any institution in the
	uilty of, abetting or being part of a conspiracy to promote
	se the declaration is found to be untrue, I am aware that my
admission is liable to be cancelled.	
Declared this day of	month of year.
	Signature of the Deponent:
	Name:
	-
	Name:
V	Name: Address:
	Name: Address: Phone No. / Cell No.
Verified that the contents of this affidavit are is false and nothing has been concealed or mis	Name: Address: Phone No. / Cell No. ERIFICATION true to the best of my knowledge and no part of the affidavit sstated therein.
Verified that the contents of this affidavit are is false and nothing has been concealed or mis	Name: Address: Phone No. / Cell No. ERIFICATION true to the best of my knowledge and no part of the affidavit
Verified that the contents of this affidavit are is false and nothing has been concealed or mis	Name: Address: Phone No. / Cell No. ERIFICATION true to the best of my knowledge and no part of the affidavit sstated therein.

OATH COMMISSIONER:

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

Stamp Paper of Rs. 10/-

AFFIDAVIT BY PARENT / GUARDIAN

I, Mr./Mrs./Ms			(full name of pare	nt/guardian)
father/mother/guardian of				
(full name of student), having				
Technology, Malda have received		_	_	
Higher Educational Institutions, understood the provisions conta			ns"), carefully read an	nd fully
 I have, in particular, pragging. 		_	am aware as to what c	onstitutes
•	inistrative action the	7 and clause 9.1 of the nat is liable to be taken vely or passively, or b	n against my ward in c	ease he/she is
clause 3 of the lb) My ward will no	ot indulge in any l Regulations. ot participate in or	nat behaviour or act that me abet or propagate throws as ragging under claus	ough any act of comm	nission or
e	gulations, without	ragging, my ward is lorejudice to any other any law for the time	criminal action that i	
5) I hereby declare that institution in the concentracy to promote untrue, the admission	untry on account te ragging; and fu	of being found guilt rther affirm that, in c	ty of abetting or bei	ng part of a
Declared this	_ day of	month of	year.	
	Signa Name Addr			
	-	hone/ Mobile No.: FICATION		
Verified that the contents of this is false and nothing has been con		•	wledge and no part of	the affidavit
Verified at	(place) on this the	(day) of	(month),	(year).
	Signa	ture of Deponent:		
Solemnly affirmed and si		presence on this ling the contents of thi	the(day	y) of
	OATH C	OMMISSIONER:		

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

AFFIDAVIT

l,		_, son/daughter of	, Application
No	, Roll No		of JoSAA/CSAB-2025, resident of
			do
hereb	y solemnly affirm and declare	as follows:-	
•	I understand that allotment	of hostel accommodation	is the discretion of the Institute.
•	I will abide by all the Rules Disciplinary bodies.	& Regulations of the In	stitute, Boards, and Academic &
•	That I will not bring any outs	side pressure, influence du	ring my study at GKCIET, Malda.
•	That if I violate any of those understand that my admission	-	ne during my course at GKCIET, I Institute Authority.
•	I was not involved in any form not have any FIR lodged aga	•	ny earlier college/institute and do
•	I do not have/have any chroapplicable)	onic / communicable disea	ase. (disease name to be given, if
•	I will ensure that my attenda	ance will remain >= 75% in	all semesters.
•	I will ensure payment of fees	s on time.	
	All the statements are true to	o the best of my knowledg	ge and belief.
			Signature of the student
Date:			
			Signature of the parent's
Date:			

FORM-GEN-EWS

INCOME & ASSET CERTIFICATE TO BE PRODUCED BY ECONOMICALLY WEAKER SECTIONS

Certificate No		Date			
1. This is to ce son/daughter/wife of	ertify that Shri/Smt./Kum	nari permanent resident of			
	, Village/Street	permanent resident of Post Office			
Di	strict	in the State/Union Territory			
Pin	Code whose pl	notograph in attested below belongs to			
	akh only) for the financial ye	acome* of his/her "family" ** is below ar 2024-2025. His/her family does not			
 5 acres of agricult 	ural land and above;				
•	1000 sq. ft. and above;				
	f 100 sq. yards and above in no	otified municipalities;			
-	1 •	ve in areas other than the notified			
		belongs to the caste which is Other Backward Classes (Central List).			
	Signature with	n seal of Officer			
		Designation			
Recent Passport size attested photograph of the applicant	would be requir	assets of the families as mentioned red to be certified by an officer not k of 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.



Ghani Khan Choudhury Institute of Engineering and Technology

(A Centrally Funded Technical Institute under the Ministry of Education, Govt. of India) (Affiliated to WBSCT&VE&SD [TET&SD] & MAKAUT, Govt. of West Bengal)

Narayanpur, Malda - 732141, West Bengal www.gkciet.ac.in

ANNEXURE-XI

B Tech fees structure for the seed

Description	Fees under GKCIET (Rs.)	Fees under MAKAUT (Rs.)	Remarks	Fees for 1st Semester 2025-26	Fees for Odd Semester except 1st Semester 2025-26	Fees for Even Semester 2025-26
Caution Money	₹ 5,000.00	-	1st Semester/Refundable#	₹ 5,000.00	-	/ -
Admission Fee	₹ 605.00	-	Each odd Semester	₹ 666.00	₹ 666.00	9747
Registration Fee	-	₹ 500.00	1st Semester	₹ 500.00	-	_
Development Fee	-	₹ 2,200.00	1st Semester (Rs. 550/- per year)	₹ 2,200.00	-	-
Student's Insurance	₹ 160.00	-	Each odd Semester	₹ 160.00	₹ 160.00	-
Medical Fee	₹ 200.00		Each Semester	₹ 200.00	₹ 200.00	₹ 200.00
Tuition Fee*	₹ 3,993.00		Each Semester	₹ 3,993.00	₹ 3,993.00	₹ 3,993.00
Session Charge	₹ 6,655.00	(-)	Each Semester	₹ 6,655.00	₹ 6,655.00	- 60 NATES
Examination Fee	₹ 363.00	₹ 1,200.00	Each Semester	₹ 1,563.00	₹ 1,563.00	₹ 6,655.00
Institute I-Card	₹ 79.00	-	1st Semester	₹ 79.00		₹ 1,563.00
Library I-Card	₹ 79.00	-	1st Semester		-	-
Library/Magazine/others	₹ 1,502.00	-	Each Semester	₹ 79.00	7 1 500 00	En Surantania Anton
Book Bank	₹ 1,320.00		1st Semester	₹ 1,502.00	₹ 1,502.00	₹ 1,502.00
Students Welfare/Sports/ Extra Curricular Activities	₹ 5,192.00	*	1st Semester	₹ 1,320.00 ₹ 5,192.00	2	-
C&P Activity Fund	₹ 3,113.00	-	1st Semester	₹ 3,113.00		77
Overhead Charges	₹ 3,319.00	-	Each Semester		÷ 2 210 00	-
Other fees	As applicable		Lucii odilicatei	₹ 3,319.00	₹ 3,319.00	₹ 3,319.00
Exempted for the candidat	v judyawi i		Total	₹ 35,541.00	₹ 18,058.00	₹ 17,232.00

candidate under the TFW Scheme.

Dr. Aditya Kumar Singh Asst. Registrar (Academic, HMC)

GKCIET, Malda