



केन्द्रीय प्रौद्योगिकी संस्थान कोकराझार CENTRAL INSTITUTE OF TECHNOLOGY KOKRAJHAR

Deemed to be University, under the MoE, Govt. of India
Kokrajhar, BTAD, Assam 783370

www.cit.ac.in

COUNSELLING FORM-2026

A. Name of the Program Applied:

DIPLOMA (ENGG.)	DIPLOMA (AMT)	B. TECH (DIRECT)	B. DES (DIRECT)
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Entrance Examination Details:

Form No	Entrance Roll No (check scorecard)	CITKEE/JEE/UCEED Score	Overall Rank
Permanent Residence Region (BTR/NE/All-India)		Reservation Category (GEN/OBC-NCL/SC/ST/PWD/EWS)	

Preferred Branch of Study (Not applicable for Diploma (AMT) and B. Des programs):

Available Branches (Department Code)	Preferred Branch (Write below)
1. Civil Engineering (CE) 2. Computer Science and Engineering (CSE) 3. Electronics and Communication Engineering (ECE) 4. Food Engineering and Technology (FET) 5. Instrumentation Engineering (IE)	Choice 1- Choice 2- Choice 3-

B. Personal Information:

Name of the candidate (BLOCK LETTERS)	
Name of the candidate (In HINDI)	
Date of Birth in DD/MM/YYYY format	
Name of the Parent/Guardian	
Address Details:	
Vill/Town-P. O:	
P.S.- District- State:.....	
Postal Code- Phone- Email-Id:.....	

C. Academic Details: Details of marks obtained in Class X:

Aggregate Percentage of Total Marks obtained in Class X	% of Marks obtained in Maths, Science and English			
	Mathematics	Science	English	Aggregate % of these three subjects

Details of marks obtained in Class XII (not required for Diploma program):

Aggregate Percentage of Total Marks obtained in Class XII	% of Marks obtained in any three subjects out of Maths/Physics/Chemistry/Biology/Computer Science/Electronics			
	Subject 1 (write below)	Subject 2 (write below)	Subject 3 (write below)	Aggregate % of these three subjects

I hereby declare that the information given by me above are correct and true to the best of my knowledge.

Full signature of the candidate with date



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D. Details of Documents to be submitted by the candidate and verified by Officials:

Name of the Candidate (Block Letters)												
Name of the Candidate (in Hindi)												
APPLICATION FORM NO.					ENTRANCE ROLL NO.							

Sl. No.	Name of Document	Check box	Remarks
1	CITKEE/JEE/UCEED Scorecard		Signature of Verifying Officer
2	Age proof certificate		
3	Class X Mark sheet		
4	Class X Pass Certificate		
5	Class XII Mark sheet (Not required for Diploma)		
6	Class XII Pass Certificate (Not required for Diploma)		
7	PRC for BTR candidates (Domicile certificate for other regions)		Signature of Verifying Officer
8	Reservation Category Certificate if applicable		
9	Migration Certificate		
10	Character Certificate (original copy)		Signature of Verifying Officer
11	Medical Fitness Certificate (from a Govt. health centre) (original copy)		
12	Eye Fitness Certificate (from a Govt. health centre) (original copy)		
13	Gap certificate (original copy) if applicable		
14	Anti-ragging affidavit (original copy)		
15	Student Undertaking		

Branch Allotment Details- (To be filled by CIT Official only)

Name of Program	Diploma (Engg.)		Diploma (AMT)			B. Tech.		B. Des.		
Branch Allotted	CE	CSE	ECE	FET	IE	MCD				
Academic Roll Number										
Signature of the Branch Allotment Officer										

Acceptance by the candidate or his/her representative:

I hereby accept the current Branch which has been allotted to me.

Full signature of the Candidate with date