



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. CITK Admission-2026 Application Details:

Name of the Program and Branch applied for- (Please Tick)

Program-	B. TECH (VERTICAL)			B. TECH (LATERAL)		B. DES (VERTICAL)
Branch-	CE	CSE	ECE	IE	FET	MCD

Entrance Examination Details:

Form No	Entrance Roll No (check scorecard)						Entrance Score (s)	
Permanent Residence Region (BTR/NE/All-India)	Write here-				Reservation Category (GEN/OBC- NCL/SC/ST/PWD/EWS)		Write here-	

B. Personal Information:

Name of the candidate (BLOCK LETTERS)	
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:

Academic Details of Class X

Name of Exam	Name of Board/Council	Aggregate %	Year of Passing
Class X			

Details of marks obtained in Diploma Program:

Name of the Institute	
Name of the Board/Council	
Final CGPA obtained (out of 10) or Equivalent %	
Year of passing	

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 of CITK:

Name of the Candidate (BLOCK LETTERS)														
APPLICATION FORM NO					ENTRANCE ROLL NO									

Kindly attach the following Documents in the same order as given below- (To be checked by CIT Official only):

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

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

Name of Program	B. TECH (VERTICAL/LATERAL)					B. DES (VERTICAL)				
	CE	CSE	ECE	FET	IE	MCD				
Branch admitted to										
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