

Application form for Design Programme:

JUG LPG	
or PG Specify Disciplines:	
A PERSONAL INFORMATION	
Name: (Mr. / Ms.)	
First Name Middle Name	Last Name
Gender: Date of Birth (D/M/Y): DD MM YYYY	Age:
Place of Birth: Natio	onality:
Permanent address:	
City: State:	Pin Code
Contact No. Email:	
Address for Correspondence:	
City: State:	Pin Code
Contact No. Email:	
Parent's/Guardian's Name:	
Relationship with Applicant:	
Profession of the Parent's/guardian: Anr	nual Income:
Parent's Contact Number:	
Email:	

B HEALTH INFORMATION

Blood Group:	Physically Challenged or Not:
Any Major Illness:	Please Specify Illness:

C EDUCATIONAL INFORMATION

Exam	Percentage/Grade	Year of Passing	Year Gap (if any)

D WORK EXPERIENCE

Company Name	Year	Experience (if any)

E TEST CENTER	
Test Center:	
F DD DETAILS	
DD Date: DD Nu	imber:
Bank Name:	
 Please check the list below before sending form: a) Students should send completelly filled form. b) Demand Draft of Rs. 2500/- in favour of "MITID PUNE", payable at Pune should be attached in front of the form with name of the student's written on the back side of the Demand Draft. c) Identity card size color photograph should be pasted on space provided in the form. d) Complete set should be send to following address: Admission Cell, MIT Institute of Design, Rajbaug, Loni-Kalbhor, Next to Hadapsar, Pune Solapur Highway, Pune - 412201. Tel: +91 20 30693695/696 	Student's Signature