



MARUDHAR ENGINEERING COLLEGE
Approved by AICTE, New Delhi & Affiliated to RTU, Kota
SWAMI KESHVANAND INSTITUTE OF PHARMACY



Rajasthan University of Health Science, Jaipur
AN ENGINEERING, MANAGEMENT AND PHARMACY COLLEGE
NH-11, Jaipur Road, Raisar, Bikaner, Rajasthan-334001

Phone:0151-2746923, Fax: 0151-2746979

Website: www.marudhar.ac.in, www.marudhar.org, www.skip.ac.in, E-mail: info@marudhar.ac.in, info@marudhar.org, info@skip.ac.in

ADVANCE REGISTRATION FOR MANAGEMENT SEATS

(Photocopy of this form is also valid)

Session: 2010-2011

Name of Applicant: _____

Date of Birth: ___/___/___

Father's Name: _____

Father's Occupation: _____

Address: _____

Contact Telephone No.: _____

LandLine: _____

Mobile: _____

Portfolio of Programmes: Please tick mark your Preference/Choice of course

B.Tech. 1st Year/ 2nd year – lateral entry for diploma holders	Preference / Choice
• Electronics and communication engineering	()
• Computer Science and Engineering	()
• Information Technology	()
• Electrical Engineering	()
• Mechanical Engineering	()
M.B.A () B.Pharmacy () BBA () BCA ()	

Educational Qualification :

Class	% of Marks	Name of School	Board /University
Class X			
Class XII Passed /Appearing in Final			
Diploma in Engineering Passed/ Appearing in Final			
Graduation Stream: B.A. B.Com. /B.Sc. Or _____ Passed / Appearing in Final			

Please Note:

1. Students passed or appearing in class XII are eligible for B.Tech / B.Pharmacy course and students passed graduations or appearing in final year are eligible for M.B.A course.
2. Diploma holders /students appearing in diploma (final year) are eligible for direct admission in B.Tech/ B.Pharmacy 2nd year.
3. All admission in our college are done in accordance with state / University merits.
4. Registrations shall be applied first against management seats and thereafter against vacant seat, if any.

How you have come to know about our college?

1. Through Newspaper :Name _____
2. Friend :Name _____
3. Coaching Institute / Counsellor :Name _____
4. Faculty Member / Student of MEC :Name _____
5. Your School / College Staff :Name _____

Signature of Applicant: _____

For Office Use Only:

Registration No. 2010/ B.Tech/M.B.A./ B.Pharmacy / _____

* Registration Amount of Rs. _____ /- paid by cash/ cheque/ DD/ Not Paid
(Through a DD in favour of " Marudhar Engineering College"/ "SKIP" payable at Bikaner)
*(To be adjusted against Admission fee)

Signature of Admission Coordinator _____