



Student Admission application form

Personal Information					
First Name					Student's Photo Size (3x4) (2)
Middle Name					
Last Name					
Sex					
Date of Birth	Calendar	Date	Month	Year	
	E.C				
	G.C				
Place of Birth					
Nationality					
Disability	Visually Impaired <input type="checkbox"/> Hearing Impaired <input type="checkbox"/> Physically Challenged <input type="checkbox"/>				
Residential Address (WHERE DID YOU COME FROM?)					
Region			Kebele		
Zone			Tel. Home		
Wereda			Tel. Mobile		
MMXXV			2025		
Person to be contacted in case of emergency					
First Name				Region	Zone
Last Name			Tel. Home		
Relationship			Tel. Mobile		
Preparatory School Information(School where you Completed Grade 12)					
School Name			Starting Year(E.C)		
Location			Ending Year(E.C)		
Stream			Score		
Desired field of study					
School					
Department/Placement					
Classification of Admission	Full time <input type="checkbox"/> Part time <input type="checkbox"/> Summer <input type="checkbox"/>				
Certification Award	<input type="checkbox"/> Grade 1 <input type="checkbox"/> Grade 2 <input type="checkbox"/> Grade 3 <input type="checkbox"/> Grade 4 <input type="checkbox"/> Grade 5 <input type="checkbox"/>				
Campus	<input type="checkbox"/>				
To be filled in three choice(ONLY FOR EXTENSION AND SUMMER)					
Field of study (choice 1)					
Field of study (choice 2)					
Field of study (choice 3)					
Educational Background (only fill, if you have already studied in college/University)					
University/College /Institute Name	Country		Graduated date		Award

N.B. Fill All Required Information

STATEMENTS BY THE APPLICANT

I hereby certify that all the information given in this form is complete, correct and accurate. I fully realize that the AICTE Training is entitled to take any action on me, including dismissal if the information given by me here is found incorrect or misleading at any time. I also realize that I will not be entitled to any reimbursement of whatever fee I might have paid in cases where the AICTE Training takes any action on me as a result of any incorrect or misleading information given by me. I further undertake to observe all rules and regulations of the AICTE Training in general and that of the Faculty to which I will be assigned in particular if I am accepted by the AICTE Training and to refrain from any activity which may be contradiction to the interest of the AICTE Training and Community. I shall also take full responsibility for reading and abiding by the rules and regulations of the AICTE Training Student Handbook.

Name _____ Signature _____
Date of Application _____

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2025

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