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JAWAHARLAL NEHRU TECHNOLOGICAL UNIVERSITY KAKINADA
KAKINADA-533 003, ANDHRA PRADESH, INDIA
www.jntuk.edu.in

Application Form for Admissions into Industry Sponsored M. Tech Course Collaboration with Avantel for Academic Year 2025-26

(Signal Processing and Communications)

(Please read the ***information to the candidates*** before filling the Application)

General instructions: *Applicants should fill in this form completely and make payment online in favour of* ***The Registrar, JNTU Kakinada Admissions.****, at www.online sbi.com through SBI Collect and send the filled application form with all enclosures to* The Director of Admissions, JNTUK, KAKINADA – 533 003,Andhra Pradesh, India on or before 31-07-2025 by 5 pm by email to da@jntuk.edu.in.

PAYMENT DETAILS: Rs.1000/- in favour of "**The Registrar JNTU Kakinada Admissions".**

Name of the Bank	SBI Collect Reference No.	Date of Payment	Amount
SBI			Rs.1000/-

Rank obtained in the Entrance Test:

S.No	Name of the Test	Hall ticket No	Rank / Percentile
1	Valid Gate Score		
2	PGECET		

1. NAME (in block letters) :……

2. Father's /Husband's Name :…….

3. Permanent Address :……

:……

4. Address for Correspondence: ……
(with PIN code)

……

…..……

Email ID : ……..

Mobile . ……Alternate Mobile:……

5. Date of Birth:

DATE		MONTH		YEAR			

6. Particulars of Qualifying Examination (Enclose Xerox Copies of Provisional Certificates/ Marks Memos)

S.No	Name of the Qualifying Examination	Name of the University	Month & Year of Passing	Total Marks /Percentage

7. Any other relevant academic information:

DECLARATION BY THE APPLICANT

I declare that the information furnished in the application is true to the best of my knowledge. I accept that if any statement made in this application is found incorrect on scrutiny, the application may be summarily rejected and the admission may be cancelled if granted on the basis of such incorrect information.

I declare that I have not joined and will not join any course of study of any other University or Institute during the period of my study in this University and I will abide by the rules and regulations of the University. I will also maintain 75% of attendance as required by university regulations.

Date:

Place: **SIGNATURE OF THE CANDIDATE**

Note: 1. Incomplete applications will be summarily rejected and no correspondence in this regard will be entertained.
2. Fee once paid will not be refunded under any circumstances.
3. University will not be responsible for any postal delay/loss in transit.
4. If minimum number of students is not available, the course will not be offered.