# BIPIN TRIPATHI KUMAON INSTITUTE OF TECHNOLOGY, DWARAHAT, DISTT.-ALMORA –263653 (UTTARAKHAND)

# **NOTICE**

# Admission/Reporting

# B.Tech. 2<sup>nd</sup> Year (Lateral Entry) 2024-25

All candidates allotted to BTKIT Dwarahat through UTU online counseling for the admission in B.Tech.-2<sup>nd</sup> Year( Lateral Entry) for the session 2024-25, should report at the institute for document verification and admission process with all the relevant original documents as given below:

- 1. All original documents and **TWO SET** of self attested photocopy of each.
- 2. Undertaking/Affidavit (Annexure A) [affidavit on Rs. 10/- Non-Judicial Stamp Paper]
- 3. Anti-ragging affidavit on Rs. 10/- Non-Judicial Stamp Paper- by student (Annexure B)
- 4. Anti-ragging affidavit on Rs. 10/- Non-Judicial Stamp Paper- by parent (Annexure- C)
- 5. Allotment letter
- 6. 10<sup>th</sup>, 12<sup>th</sup> and Diploma mark sheet and certificates
- 7. Category certificate (SC/ST/OBC), (if applicable)
- 8. OBC Candidates must have to submit their Caste Certificate along with a notarized affidavit on Rs. 10/- Non-Judicial Stamp Paper mentioning that he/she doesn't belongs to Creamy Layer.
- 9. EWS certificate, if applicable
- 10. Sub-Categories certificates like, Armed Forces (AF), Freedom Fighter (FF) and Physically Handicapped (PH) etc. (if applicable)
- 11. Domicile certificate for state quota
- 12. Medical certificate in prescribed format (Annexure- 8)
- 13. Character certificate from last attended school (in original)
- 14. T.C./Migration Certificate (in original)
- 15. Aadhaar Card
- 16. Affidavit for gap [on Rs. 10/- Non-Judicial Stamp Paper], (if applicable)
- 17. 06 Photographs (passport size)
- 18. Receipt of institute fee (fee will be deposited through online mode)
- If any further counseling related queries, please mail to admissionbtkit@gmail.com

(Notarized affidavit on Rs. 10/- Non-Judicial Stamp Paper)

## (UNDERTAKING/AFFIDAVIT)

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Before Director E	SIKII.	Dwaranat Ain	nora Uttarakhand

I(Name	of the candidate) Son/Daughter of
`	(Permanent address)
	(B.Tech./M. Tech./ M.C.A/
B.Tech. (LE) ) at BTKIT hereby solem	inly affirm under oath and gives undertaking that: -

- 1. My above-mentioned name and address are true and correct.
- 2. I have knowledge, that for admission in any course at BTKIT, a physical verification/validation of all the original certificates/documents is mandatory, but due to unavailability of final marksheet/ other document the BTKIT Counseling Committee 2024 has granted time for the physical verification/ validation of certificates/documents for admission.
- 3. I have knowledge, that my admission is subject to the submission and physical verification of following certificates within the specified time limit, as notified by the BTKIT Counseling Committee 2024: -

Class X & XII Mark sheet and Certificate, Medical Certificate, Character
Certificate, Transfer & Migration Certificate, Category Certificate (OBC/SC/ST/EWS) (if
applicable), Sub Category Certificate, AF/FF/PH/TFW), (if applicable), Domicile Certificate
for State Quota, Income certificate (if applicable), Affidavit for GAP, (if applicable), Photo
identity card (Aadhaar Card/ issued by Govt. agency)

Any other document notified by BTKIT Counseling Committee 2024.

- 4. I understand, that till the time I submit above-mentioned certificates for physical verification/validation, my admission shall be treated as provisional admission.
- 5. I declare, that in case I am unable to submit above mentioned certificates/documents for physical verification/validation within the time limit that is notified by the BTKIT Counseling Committee 2024, I shall not claim any equity on account of admission against the allotted seat. I also state that I am well aware of the fact that my admission is completely subject to the physical verification/validation of my original certificates otherwise my admission is liable to be cancelled & all the fees deposited by me shall be forfeit.
- 6. I am agree, that if any falsified records are detected at any stage of admission or during the course of study & even after I pass out my course, my admission to the course shall be liable to be cancelled or the degree awarded by the UTU shall be taken back, further, I will be debarred from attending any course at UTU for the next 05 (Five) years and in addition a criminal case under relevant section(s) of law in force may be initiated against me.
- 7. I undertake that I shall abide by the Rules & Regulations of the BTKIT. I also hereby undertake that I shall accept the decision of the BTKIT Counseling Committee 2024 as final if the seat allotted to me is taken back or if my admission is cancelled due to submission of incorrect certificates/non submission of certificates within the duration of time allotted as above, to furnish the same.

..... Deponent

## Verification

That I above named deponent verify that the facts presented under point no. 1 to 7 of this undertaking/affidavit are true & correct to the best of my knowledge & belief and nothing material has been concealed. I solemnly affirm that I shall always abide by this undertaking/affidavit.

Verify on thisday of	••••••	2024.
Verified at	(place).	

# AFFIDAVIT BY THE STUDENT

AFFIDAVII DI THE STUDENT
1) I(full name of student with admission/registration/enrolment number) S/o D/o Mr./Mrs./Ms
2) I have in particular, perused clause 3 of the Regulations and am aware as to what constitutes ragging.
3) I have also, in particular, perused clause 7 and clause 9.1 of the Regulations and am fully aware of the penal and administrative action that is liable to be taken against me in case. I am found guilty of or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging.
4) I hereby solemnly aver and undertake that
a) I will not indulge in any behavior or act that may be constituted as ragging under clause 3 of the Regulations.
b) I will not participate in or abet or propagate through any act of commission or omission that may be constituted as ragging under clause 3 of the Regulations.
5) I hereby affirm that, if found guilty of ragging, I am liable for punishment according to clause 9.1 of the Regulations, without prejudice to any other criminal action that may be taken against me under any penal law or any law for the time being in force.
6) I hereby declare that I have not been expelled or debarred from admission in any institution in the country on account of being found quality of, abetting or being part of a conspiracy to promote, ragging; and further affirm that, in case the declaration is found to be untrue, I am aware that my admission is liable to be cancelled.
7) I hereby declare that I am fully aware that this institute is established in a hilly region of Uttarakhand and also has the risk of wild animals, especially in the night hours, so I will not move outside the hostels after 9 p.m. onwards. In the event of any issue due to this, I will be solely responsible. Declared thisday ofmonth ofyear.
Signature of deponent
Name:
VERIFICATION
Verified that the contents of this affidavit are true to the best of my knowledge and no part of the affidavit is false and nothing has been concealed of misstated therein.
Verified at(place)on this the(day)of(month)(year)
Signature of deponent
Name:
Solemnly affirmed and signed in my presence on this the the(day)of(month),(year)after reading the contents of this affidavit.

**OATH COMMISSIONER** 

## **AFFIDAVIT BY PARENT/GUARDIAN**

1) I Mr./Mrs./Ms	(Full name	e of	parent/gua	rdian)
father/mother/guardian of	(Full N	Vame	of student	with
admission/registration/enrolment number.			admitted	to
(Name of the insti	itution) have receive	ed a co	opy of the	UGC
Regulations on Curbing the Menace of Ragging	in Higher Education	onal Ir	nstitutions,	2009,
(hereinafter called the "Regulations"), carefully read a	and fully understood	the pro	visions con	tained
in the said Regulations.		-		
2) I have in newticular manused clause 2 of the Decr	alations and am arria	to	vibat aana	titutoo

- 2) I have, in particular, perused clause 3 of the Regulations and am aware as to what constitutes ragging.
- 3) I have also, in particular, perused clause 7 and clause 9.1 Regulations and am fully aware of the penal and administrative action that is liable to be taken against may ward in case he/she is found guilty of or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging.
- 4) 1 hereby solemnly avers and undertakes that
- a) My ward will not indulge in any behavior or act that may be constituted as ragging under clause 3 of the Regulations.
- b) My ward will not participate in or abet or propagate through any act of commission or omission that may be constituted as ragging under clause 3 of the Regulations.
- 5) I hereby affirm that, if found guilty of ragging, my ward is liable for punishment according to clause 9.1 of the Regulations, without prejudice to any other criminal action that may be taken against my ward under any penal law or any law for the time being in force.
- 6) I hereby declare that my ward has not been expelled or debarred from admission in any institution in the country on account of being found quality of, abetting or being part of a conspiracy to promote, ragging; and further affirm that, in case the declaration is found to be untrue, the admission of my ward is liable to be cancelled.
- 7) I hereby declare that I am fully aware that this institute is established in a hilly region of Uttarakhand and also has the risk of wild animals, especially in the night hours, so my ward will not move outside the hostels after 9 p.m. onwards. In the event of any issue due to this, my ward will be solely responsible.

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L Jeclared fi	hisday	n character in	nonth of	VAAT
Deciaieu u	msuav	UIII	1011ttl 01	vear.

Signature of deponent

Name: Address: Mobile No.:

### **VERIFICATION**

Verified that the contents of this affidavit are true to the best of my knowledge and no part of the affidavit is false and nothing has been concealed of misstated therein.

Verified at.....(place).....on this the.....(day).....of.....(month)......(year)......

Signature of deponent

Solemnly affirmed in my Signature of deponent presence on this signed and the......(day).....of.....(month),......(year)......after reading the contents of this affidavit.

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# स्थाई निवास प्रमाण-पत्र

यह प्रमाणित किया	जाता है कि श्री/श्रीमती/कुमारी
पुत्र/पुत्री/पत्नी श्री	निवासी ग्राम/मोह./वार्ड तहसील
<del></del>	उत्तराखण्ड के स्थाई निवासी है।

यह भी प्रमाणित किया जाता है कि उक्त प्रमाण-पत्र निर्गत करने से पूर्व निर्धारित समरत मानदण्डों की भली भांति जाँच कर ली गई है और मैं जाँच से पूर्णतया सन्तुष्ट हूँ।

> मोहर जिलाधिकारी/परगनाधिकारी

# उत्तराखण्ड के अन्य पिछड़े वर्ग के लिए जाति प्रमाण-पत्र का प्रपत्र (UKBC)

उत्तराखण्ड राज्य की	रीनगरजिलाजिल के व्यक्ति हैं। यह जाति उत्तराखण्ड लोक सेवा (अनुसूचित ड़े वर्गों के लिए आरक्षण) अधिनियम की अनुसूचीके
यह भी प्रमाणित किया जाता है कि श्री/श्रीमती,	/ कुमारीउक्त अधिनियम
द्वारा निर्धारित क्रीमिलियर से आच्छादित नहीं है।	
श्री / श्रीमती / कुमारीत	था अथवा उनका परिवार उत्तराखण्ड के ग्राम
तहसीलनगर	में सामान्यता रहता है।
अभ्यर्थी के हस्ताक्षर :	हस्ताक्षर
दिनांक :	पूरा नाम :
स्थान :	पूरा नाम : मोहर
	जिला अधिकारी / अतिरिक्त जिला अधिकारी / सिटीमजिस्ट्रेट /
	परगना मजिस्ट्रेट / तहसीलदार

उत्तराखण्ड स्वतन्त्रता सेनानी (Sub Category ULFF/UDFF)
(उस जिले के जिलाधिकारी द्वारा प्रमाणित जिसका अभ्यर्थी निवासी है )
सेवा (शारीरिक रूप से विकलांग, स्वतन्त्रता संग्राम सेनानियों के आश्रितों और भू, पू, सैनिकों के लिए
अधिनियम १६६३ के अनुसार स्वतन्त्रता संग्राम सेनानी के आश्रित के प्रमाण-पत्र का प्रपत्र।)

# प्रमाण-पत्र

प्रमाणित किया जाता है कि श्री/श्रीमती	निवासी ग्राम
तहसील नगर	के आश्रित और भ. प. सैनिक के लिए आरक्षण) अधिनियम
(शारारिक रूप संविक्ताग, स्वतन्त्रता संग्रान संगानवा 1993 के अनुसार स्वतन्त्रता संग्राम सेनानी है और १ पुत्र/पुत्री/पौत्र/अविवाहित पौत्री उपरांकित अधिनियम	में /श्रामता /कमारा (आश्रित)
पुत्र/पुत्री/पीत्र/आववाहित पीत्री उपराकित आवानपन (स्वतन्त्रता संग्राम सेनानी)	पे आजित है।
	हस्ताक्षर
अभ्यर्थी के हस्ताक्षर	पूरा पदनाम
दिनांक एवं स्थान	मोहर जिलाधिकारी (सील)

ANNEXURE - 5

# उत्तराखण्ड सेना दल (Sub Category ULAF/UDAF) (अन्तिम यूनिट के आफिसर कमान्डिंग द्वारा प्रमाणित) किया जाता है कि श्री/श्रीमती ......

यह प्रमाणित किया जाता है कि श्री/श्रीमती	
(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	100
- 1111111	दिनाक के केन किन
(Superannauated) / युद्ध में मारे गए / अपंग हो गए / त	वें उस समय भारतीय थल सेना / जल सेना / ताम सेना उनान
दिनांक :	यूनिट कमान्डिंग
그 가게 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그	आफिसर के हस्ताक्षर
	नाम
स्थान :	मो हर
	(जिला मिलिस्टेट टाज प्रामीपन)
यह प्रमाणित किया जाता है कि श्री/श्रीमती	/कुमारी
119/11	हर तहसील
जिला उपरोक्त सेना दर अपंग हो गए / कर्मचारी जो उत्तराखण्ड के स्थायी नि	ल के सेवा निवृत्त (Superannauated) / यह में मारे गए /
अभ्यर्थी के हस्ताक्षर	हस्ताक्षर जिला मजिस्ट्रेट
	नाम
दिनांक एवं स्थान	मोहर

12		5 63						
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	ANNEXURE - 6
शारीरिक विकलांग व	
(मुख्य चिकित्सा अधिव	गरी द्वारा प्रमाणित)
यह प्रमाणित किया जाता है कि श्री/श्रीमती/कुमारी	ਪਤ /ਸਤੀ / ਐ
नीचे लिखे कारणों से शारी	रेक रूप से विकलांग है।
, (केवल मुख्य चिकित्सालय	
4	
यह भी प्रमाणित किया जाता है कि उपरोक्त विकलांग रिथां नहीं होगी।	ते अभ्यर्थी के इन्जीनियरिंग शिक्षा प्राप्त करने में बाधक
	हस्ताक्षर
अम्यर्थी के हस्ताक्षर	पूरा नाम
दिनांक एवं स्थान	
	मोहर
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# FORMAT FOR MEDICAL CERTIFICATE

(To be obtained from a Chiel Medical Officer or Medical Officer of a Participating UTTARAKHAND STATE Funded Engineering Institute)

Name of Candidate:				
JEE Main Roll No:	Subcategory:			
	n: Father's Name:			
(To be filled in by the Candidate)				
LT M.I.		V	Color Vision:	
Height Weight Chest	Abdomen	I	Without gloss	
rieght weight chest	Tibdomen	S	Without glass:	
		I	With glass:	
		0		
		N		
		0.1		
History Operation Ko	ockh's	_ Col	icsBP	
Seizures Asthr	maI	Piles	Diabetes	
E PulseTonsil	DMS		Hernia	
X	200			
A PallorL.Nodes	CSOI	М	Hydrocele	
M				
I N				
A Cardiovascular		CN	IS	
T				
Respiratory	GIT		T	
o Genitourinary		Others		
N				
Is the candidate physically handicapp	ed: Yes	/No:_		
If yes, Type of handicap (Please tick):	Тур	Type-I: One leg defective or missing		
	Type-	Type-II: One hand defective or missing		
		Type-III: One eye defective or missing		
	**	e-1v: (	One hand and one leg defectiv	
Any other type of handicap (Please sp	ecify)			
Any other findings:				

Certified that the candidate is physically fit/unfit/temporarily disqualified to pursue engineering studies

Signature of Candidate

Signature of the issuing Medical Officer and date (With official Stamp)

# उत्तराखण्ड सरकार

(कार्यालय त	नहसीलदार	जनपद	)		
(3	भधिसूचना संख्या-64/XXXVI(3)/2010/1	9(0)/2019 दिनांक 07 मा	र्च 2019 के अधीन)।		
	आर्थिक रूप से कमजोर वर्गों के वि	लेए आय एवं सम्पति	त प्रमाण पत्र		
ग्राम स्थायी निवासी है, जिन	संख्या वर्ष हेतु मान्य दि रा030नि0 क्षेत्र का नवीन फोटो नीचे प्रमाणित है। इनके परिवा लिए निर्धारित मानक रू 8.00 लाख (रूपये आव	, तहसील र की सभी स्रोतों से वित्तीय	जिला उत्तराखण्ड के वर्ष की औसत आय आर्थिक		
1- 1 कृषि भूवि	मे 5 एकड़ या, उससे अधिक, या				
2 आवासीय	र भवन 1000 वर्ग फुट या उससे अधिक, र	या			
3. अधिसूचि	वेत नगरपालिकाओं में 100 वर्ग गज या उ	ससे अधिक के आवासीय	भूखण्ड, या		
4 अधिसूचि	ात नगरपालिकाओं के अलावा अन्य क्षेत्रों मे	ां 200 गज या उससे आ	धेक के भूखण्ड ।		
2— प्रार्थी, जो कि सामान्य जाति से है और भारत सरकार / उत्तराखण्ड सरकार की अनुसूचित जाति / अनुसूचित					
जनजाति/अन्य पि	छड़ा वर्ग सूची में सम्मिलित नही है।				
3– यह प्रमाण पत्र राजस्व उप निरीक्षक की जाँच आख्या के आधार पर जारी किया जाता है।					
			तहसीलदार (संबन्धित तहसील की मुहर)		

अभ्यर्थी का नवीनतम फोटो (सत्यापित)