**M A S T E R O F S C I E N C E I N I N F O R M A T I O N T E C H N O L O G Y**
Consortium of Institutions of Higher Learning – Hyderabad

**APPLICATION FORM**
FOR ADMISSION IN TO 2-YEAR MSIT FOR THE YEAR 2018

**Instructions:**
1. Last Date for receipt of filled in Application 14th May 2018
2. Application should be accompanied by a non-refundable demand draft of Rs. 1000/- drawn in favour of “CIHL”, on a scheduled bank payable at Hyderabad.
3. The hall ticket of entrance examination will be sent through E-mail on or before 25th May 2018.
4. For more details visit our website [www.msitprogram.net](http://www.msitprogram.net)

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1. Name of the Candidate (as per SSC or Equivalent certificate)

2. Nationality (tick ✓)  
   - Indian  
   - Others
   
   If others, country’s name ______________________

3. Sex (tick ✓)  
   - Male  
   - Female

4. Date of Birth:  
   - Day ___  
   - Month ___  
   - Year ___

5. Test centers (choose any one of the below centers)
   
   [ ] Hyderabad  
   [ ] Tirupati  
   [ ] Visakhapatnam  
   [ ] Vijayawada  
   [ ] Warangal  
   [ ] Kakinada  
   [ ] Ananthapur

6. B.Tech / B.E.  
   - Passed in year_______  
   - Pursuing Final Year

7. Complete Address for Correspondence of the Candidate

   [ ]

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8. GRE (if you have valid score)
   GRE: Analytical [ ] Quantitative [ ] Verbal [ ]

**Entrance Test Waived**
1. Candidates who have taken GRE after July 2015 are exempted from the entrance test if they have a score of 301/3.5

9. Have you already taken the “Walk in Entrance Test?”
   If so, your walkin ID _______________________

10. Mobile No. _______________________

11. E-mail Id _______________________

12. Name of the Parent / Guardian
   _______________________

13. Relationship to the Candidate (tick ✓)
   Father ✓ Mother ✓ Other

14. DD details
   DD Number _______________________
   Date of Issue _______________________
   Bank Name _______________________
   Branch Name _______________________

15. Declaration by the Candidate
   I hereby declare that all the particulars furnished by me in this application are true, complete and correct. In case any information is found to be incorrect, my admission shall automatically stand cancelled, if admitted, besides rendering me liable to such action as CIHL may deem fit.

   Place: _______________________
   Date: _______________________
   Signature of the Candidate

For more information contact:

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