



SRINIVASA EDUCATIONAL SOCIETY'S

PACE INSTITUTE OF TECHNOLOGY & SCIENCES **(AUTONOMOUS)**

Approved by AICTE and Govt. of Andhra Pradesh, Accredited by NAAC(A Grade) | Recognized under 2(f) & 12(B) of UGC
Permanently Affiliated to JNTUK, Kakinada. A.P. | ISO 9001:2015, ISO 14001:2015 and ISO 50001:2018 Certified Institution
NH-16, Near Valluramma Temple, ONGOLE - 523 272, A.P., India, Ph.: 08592 278315, 9581456310 | www.pace.ac.in

APPLICATION FORM FOR ADMISSION TO FIRST YEAR M.TECH UNDER CATEGORY 'B' SEATS (MANAGEMENT QUOTA) – 2026-27

Application No : _____

Name of the Candidate :
(As per SSC)

Father's Name :
(As per SSC)

Mother's Name :
(As per SSC)

Gender : Male / Female

Mobile Number :
(Permanent)

E – mail ID : _____

Nationality & Religion : _____

Mother tongue : _____

Category : Gen(OC)/ OC-EWS/ BC (A - B - C - D - E)/ SC/ ST/ Minority/ Others

Date of Birth : _____

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Address for Communication

House No : _____

Street / Locality : _____

Village / Town / City : _____

Mandal : _____

District : _____

State : _____

PIN Code : _____

Affix
Passport
Size Photo

(P.T.O)

ACADEMIC INFORMATION

State to which the candidate belongs :

Name of the qualifying examination : Degree :
(enclose PC & marks memo copy)

Branch :

Degree / Equivalent HT No. :

Month & Year of Passing :

Year Wise Marks in Degree

I Year		II Year		III Year		IV Year	
Max Marks	Marks Secured	Max Marks	Marks Secured	Max Marks	Marks Secured	Max Marks	Marks Secured

Total Max Marks (MM) :

Total Marks Obtained : Aggregate Percentage :

CGPA (Points) :

Qualified in GATE-2026 : Yes / No

Hall Ticket Number :

Rank (enclose rank card copy) :

Qualified in PGECET-2026 : Yes / No

Hall Ticket Number :

Rank (enclose rank card copy) :

**Name of the Branch /
Specialization opted** :

DECLARATION

I, declare that all the particulars given above are true. I, understand that any particulars given in this application, if found incorrect on scrutiny, will render the application liable for rejection. Admission, if granted on the basis of such incorrect information, will stand cancelled.

Date:

Signature of the Applicant

For office use only :

Branch/Specialization allotted :

Authorized Signatory of the College