राष्ट्रीय इलेक्ट्रॉनिकी एवं सूचना प्रौद्योगिकी संस्थान (रा.इ.सू.प्रौ.सं.)

NATIONAL INSTITUTE OF ELECTRONICS AND INFORMATION TECHNOLOGY (NIELIT)

(सूचना प्रौद्योगिकी विभाग, संचार तथा सूचना प्रौद्योगिकी मन्त्रालय, भारत सरकार की एक स्वायत्त वैज्ञानिक संस्था)

(An Autonomous Scientific Society of Department of Electronics And Information Technology, Ministry of Communications and Information Technology, Govt. Of India)

Aizawl Centre

REGISTRATION FORM – NIELIT O-LEVEL

Recent Photograph	Signature of the Applicant	Left Thumb Impression

1. NAME - IN CAPITAL LETTERS

2. FATHER'S NAME – IN CAPITAL LETTERS

3. MOTHER'S NAME – IN CAPITAL LETTERS

4. DATE OF BIRTH D D M M Y Y Y Y

5. SEX ◯ MALE ◯ FEMALE

Darken appropriate box

6. HIGHEST QUALIFICATION: (Darken appropriate box AND attach Attested copy of the Certificate, in respect of the Box darkened)

◯ 12th PASS ◯ Polytechnic Diploma ◯ Graduation or higher

6.1 Year of Passing

7. RESIDENCE DETAILS OF CANDIDATE - IN CAPITAL LETTERS

ADDRESS:

CITY: PIN CODE

STATE:

7.1. CONTACT DETAILS

PHONE NO. AADHAAR NUMBER :

APAAR ID

8. INSTITUTE DETAILS- IN CAPITAL LETTERS **8.1 ACCR. NUMBER:**

NAME:

ADDRESS:

STATUS OF INSTITUTE: ◯ ACCR. INSTTT ◯ GOVT. RECOG.SCHOOL/COLLEGE ◯ OTHERS

10. OCCUPATION: (Darken the appropriate box)

◯ Govt. Employed ◯ Govt. undertaking ◯ Self Employed ◯ Other (Please Specify) . . . . . .

11. CATEGORY: (Darken the appropriate box)

◯ General ◯ Scheduled Caste ◯ Scheduled Tribe ◯ O.B.C.

◯ Handicapped ◯ Other Please Specify) . . . . . .

12. VISIBLE IDENTIFICATION MARK

13. Email ID

14. DECLARATION:

I_____S/o / D/o _____hereby declare that, I agree to abide by the rules and regulations of NIELIT and also to the decision of the Examination authority, regarding my eligibility for filling the registration form of OLEVEL. I declare that the particulars filled in the Registration form are true to the best of my knowledge & belief. I have noted that the Examination Authority has the right to withhold my registration application, in addition to any other action as may be deemed fit in the event of any of the statement(s) made by me in the registration form/above being found incorrect

Place:

Date:

Signature of the Applicant

Documents to be attached :-

1. Qualifying Certificate
2. Birth Certificate
3. Tribal Certificate
4. Aadhaar card