



राष्ट्रीय प्रौद्योगिकी संस्थान जमशेदपुर
NATIONAL INSTITUTE OF TECHNOLOGY JAMSHEDPUR
JAMSHEDPUR – 831014 JHARKHAND, INDIA
(An Institution of National Importance under Ministry of Education, Govt. of India)

OFFICE OF THE DEAN ACADEMIC

Ref. No. NITSR/ACD/ 2021/270

Dated: 14/09/2021

**List of Documents Required for Admission in
M.Tech and M.Sc. programme through CCMT /CCMN 2021.**

The candidate selected for admission in M.Tech and M.Sc. programme through CCMT/CCMN 2021 in NSR round at NIT Jamshedpur are required to bring following documents in original for physical reporting and registration.

The candidate should submit one set photocopy of the below mentioned certificate to the Institute at the time of physical reporting.

Sl.No.	Particulars
1	Provisional allotment letter
2	Gate Score Card / Net /JAM score card as applicable
3	X Mark Sheet
4	Intermediate mark sheet
5	Grade card of qualifying examination
6	Degree certificate / provisional degree certificate of qualifying examination
7	College Leaving Certificate (original)
8	Migration certificate (Original)
9	Category certificate in case of SC/ST issued by competent authority.
10	Certificate for physically challenged if applicable
11	Certificate for OBC / EWS if applicable issued by competent authority issued on or after 01.04.2021
12	Medical fitness certificate (as per CCMT / CCMN format)
13	Four no. of recent passport size photograph

The reporting for the CCMT (M.Tech programme) / CCMN (M.Sc. programme) shall be done in physical mode at NIT Jamshedpur on **22/09/2021 from 10:00 AM to 05:00 PM**. The candidate admitted through CCMT /CCMN 2021 and could not report on 07/09/2021 & 08/09/2021 are given one more opportunity to report on 22/09/2021(M.Tech & M.Sc). The candidate failing to report shall not be registered for the course and no applicable stipend shall be paid.

The candidate coming from Kerala State shall be given another date for physical reporting and shall be provisional registered, they are requested to send the scan copy of Migration, CLC, Conduct certificate for registration to the email dean.ac@nitjsr.ac.in

Dean (Academic)

Copy to:

1. Office of the Director for kind information.
2. All HODs, All Deans, for information.
3. Registrar, for information.

MEDICAL CERTIFICATE

(The following are to be filled by the Medical Officer conducting the medical examination)

1. Height: _____ cm 2. Weight: _____ kg
3. Past History:
- a) Mental Disease : _____
- b) Epileptic Fit : _____
4. Chest:
- a) Inspiration: _____ cm b) Expiration: _____ cm
5. Blood Group : _____
6. Hearing : _____
7. Vision with or without glasses:
- a) Right Eye: _____ b) Left Eye : _____
- b) Colour Blindness: _____ d) Uniocular vision: _____
8. Respiratory system: _____ 9. Nervous system: _____
10. Heart: (a) Sounds: _____ b) Murmur: _____
11. Abdomen (a) Liver: _____ b) Spleen: _____
12. (a) Hernia: _____ b) Hydrocele: _____
13. Any other defects

Certified that _____ son/daughter of _____

- (a) fulfills the prescribed standard physical fitness and is FIT for admission to Academic Programmes.
- (b) does not fulfill the prescribed standard of physical fitness and is unfit/ temporarily unfit for admission due to following defects

Signature of the Medical Officer with date
Full Name _____
Medical Registration No. _____
Mobile No. : _____
Address for correspondence:

Office seal
