

This is not an admission form; this is your passport to a great professional career. We assure you that the decision to choose SOA as a partner to the journey of wisdom will prove to be defining. SOA ensures you an admission process which is away from any discrimination or bias.

The accompanying brochure is an encyclopedia of School of Aeronautics and provides even the miniscule of details. This will help you plunge in to the unparalleled world of future.

You are requested to go through all the columns of the application carefully before filling them. All the details filled by you will be compared with your attached testimonials.

In case you are filling this form offline, enclose a DD of ₹ 1000/- in favour of School of Aeronautics, payable at New Delhi, towards the cost of Prospectus and registration.

School of Aeronautics

H-974, Palam Extn., Part-I, Near Sector-7, Dwarka, New Delhi-110077
Phone : 25084354, 25074384, 9312408654, 9350209008
E-mail : info@soadelhi.com, ccashoka@gmail.com; Website : www.soadelhi.com



School of Aeronautics
New Delhi

APPLICATION FORM

Personal Details

Registration Number

Applicant Name in full	First Name <input style="width: 95%;" type="text"/>	Middle Name <input style="width: 95%;" type="text"/>	Last Name <input style="width: 95%;" type="text"/>
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth (DD/MM/YYYY)	<input style="width: 95%;" type="text"/>
Nationality	<input style="width: 95%;" type="text"/>	Status (Regular/Distance)	<input style="width: 95%;" type="text"/>
Caste	<input style="width: 95%;" type="text"/>	Category <input style="width: 95%;" type="text"/>	Religion <input style="width: 95%;" type="text"/>
Mobile Number	<input style="width: 95%;" type="text"/>	Admission Status (Management/ Direct/Entrance)	<input style="width: 95%;" type="text"/>
Residence Phone	<input style="width: 95%;" type="text"/>	E-mail Address	<input style="width: 95%;" type="text"/>
Correspondence Address	<div style="border: 1px solid black; height: 40px;"></div> <div style="text-align: right;">Pin Code <input style="width: 20px;" type="text"/><input style="width: 20px;" type="text"/><input style="width: 20px;" type="text"/><input style="width: 20px;" type="text"/><input style="width: 20px;" type="text"/><input style="width: 20px;" type="text"/></div>		
Permanent Address (If different from Correspondence Address)			
Passport Number	<input style="width: 95%;" type="text"/>	Issued at	<input style="width: 95%;" type="text"/>
Countries Traveled	<input style="width: 95%;" type="text"/>		

Parent Information

Father's Name	<input style="width: 95%;" type="text"/>	Mother's Name	<input style="width: 95%;" type="text"/>
Father's Mobile	<input style="width: 95%;" type="text"/>	Mother's Mobile	<input style="width: 95%;" type="text"/>
Address	<input style="width: 95%;" type="text"/>		
Father's E-mail ID	<input style="width: 95%;" type="text"/>	Mother's E-mail ID	<input style="width: 95%;" type="text"/>

Course Details

Name of the Course you are applying for	<input style="width: 95%;" type="text"/>		
Course Code	<input style="width: 95%;" type="text"/>	Academic Year	<input style="width: 95%;" type="text"/>
Are you applying as a Foreign / NRI Student?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

Why are you applying for a programme at School of Aeronautics (Please attach extra white sheets if required)

Qualifications

Educational Qualifications

Exam	Roll No.	Year	Stream	Board	Obt. Marks	Max. Marks	Percent	Result
Class - X								
Class - XII								
Graduation								
Other								

Professional / Other Qualification / Awards & Honours

Please enter details of any work experience which is relevant to your application (attach extra sheet if required)

Please tell us more about your hobbies and interests:

Other Details

Marital Status

Single

Married

Name of your Spouse

Please specify your blood group type

Do you have any medical / health problem?

If yes, please provide further details to help us to meet your needs

If Yes, please specify

Do you have a disability

Yes

No

Further Information

How did you hear about the programmes at School of Aeronautics?

Newspaper

Hoarding

Internet

Representative

Friends other (please specify)

Supporting Document's Checklist

Proof of identity (Voter Card / Driving License / Passport / PAN Card)

Caste Certificate for SC/ST/OBC

Transcripts of qualifications / Photocopy of 10th & 12th marksheet

Experience Certificate & Support Documents

10 passport size photographs

For TFWS Income Certificate

Address Proof

Medical Certificate

Domicile certificate

I confirm that information I have given is true, complete and accurate, and no information has been omitted.

I understand that the data in this form will not be provided to any external organisation, but will be used to provide me with further information on study opportunities at School of Aeronautics.

I confirm that I fulfill the minimum eligibility criteria required for the course that I am applying for

I confirm that I have read the enclosed declaration and will abide by it.

Draft No.

Bank Name

Date

Amount

Student's
Signature

Parent's
Signature

DATE

PLACE

Send the Application Form, filled in and signed, along with a Demand Draft of Rs. 1000 in favour of SCHOOL OF AERONAUTICS or attach receipt copy if already paid to the Director, School of Aeronautics, H-974, Palam Extn., Part-I, Near Sector-7, Dwarka, New Delhi-110077.

Administrative Purpose Only

Yes

No

Provisional
admission detail

Approved by

Date :

Sign. of Director

Declaration

1. The entries made in the Admission Form are correct and true to the best to my knowledge and no alteration of any kind or change of course be hereafter asked for.
2. I solemnly agree and accept to abide by all rules and Regulations, and Bye-laws of the Institute. Ignorance of any Rules, Regulations and Bye-Laws of the Institute will not be taken as an excuse for any reasons and purpose and will not be challenged by me or on my behalf by any other person in any court of Law and have filled up the Admission Form myself accordingly.
3. I agree and accept to abide myself by Rules of the Institute and in particular that shall not claim any sort of refund from the Institute which includes the Admission charges, Tuition Fee, Laboratory and Workshop Fee etc., once paid irrespective of any circumstances whatever may come in my way either due to my non-eligibility or percentage of attendance is less than 80% or discontinued study or Institute before the completion of course of Admission due to any circumstances which may come in any way or even if after admission, I do not join the Institute classes due to any other reasons, whatever may come in my way or if name is struck off from Institute's roll or dismissed due to irregular attendance or unsatisfactory progress report, I or on my behalf any other person shall not claim any sort of refund for amount paid to the Institute by on any account or any excuse.
4. The term tuition fee of the Institute will be paid by me on the due scheduled date as notified by School of Aeronautics and if fail to make payment of Tuition Fee on due date I agree to the effect that my name be struck and shall have no claim of any sort for whatever amount has been paid by me. I also abide the Bye-Laws to the effect that due to irregular attendance or unsatisfactory progress report my name be struck off and shall agree and abide the decision of the Director.
5. I do not stand debarred from any Public Examinations, University or Board. I have not concealed any fact or material information in filing up the Admission Form of Institute and filled up the same with the willingness of parents/guardian and shall abide by all Rules and Regulations of the Institute.
6. The Institute will not be responsible for any loss or damages or injury or even death from accident or wrong handling of apparatus. In case my name is struck off to any reason, I agree and abide to the effect that I shall never claim any Practical training of any sort or any sort of refund of fee etc. paid by me.
7. I shall never take any part in any sort of strikes or such activities which are not admissible according to Rules and Bye-Laws of the Institute and also agree to accept to abide that in case I take part in any sort of strikes or such activities, during the course of my study in this Institute my name be struck off without any prior information and be debarred from Examination and shall not claim any sort of refund of the amount paid by me. I also understand that any change in rules and regulations will be informed to me through notice board and I will have to abide by that.
8. Students/Parents should note that if a student absents himself/herself from classes/extra classes continuously, and on repeated notices does not present himself/herself for classes, he or she can be rusticated from the institute on disciplinary grounds.
9. Service tax payable if any will be charged from students, as per govt. norms.
10. I understand that I am pursuing skill/personality development programme. This programme is not recognized by any government body its just a personality development programme.

Name of the Student:

Place:

Date:

Signature of Candidate

To be signed by Parents/Guardian

I agree with the above declaration and accept the responsibility to observe the same and noted the Rules and Regulations of the Institute and subject Regulations of Admission and in particular no refund of amount paid to the Institute is admissible if my ward discontinues or prematurely leaves or terminates the course of admission of the Institute due to any reason or Institute Authorities struck off the name of my ward due to irregular attendance or unsatisfactory progress report during study or due to misconduct and shall be responsible for his conduct and undertake to pay without demur all his Institute dues for the entire period of training in the event of his leaving or terminating his study at any stage or even not joining the Institute after admission. I also understand that I will have to pay service tax, if applicable, as per govt. norms.

Place :

Date:

Signature of Parents/Guardian

Name:

Occupation:

Address:

Telephone Number (if any):