

UNIVERSITY OF TECHNOLOGY AND MANAGEMENT, SHILLONG

PERSONAL DETAIL FORM

**SAY NO TO DRUGS/SUBSTANCE
ABUSE**

Recent Passport
Photo

1. Name of the Student: _____

(In English Capital Letters-As per 10th Class Certificate)

2. Program & Batch (Year): _____ Semester: _____

3. Enrollment Number: _____ SAP ID: _____

4. Mobile (Shillong/Local) _____

5. E-mail UTM: _____ E-mail Personal: _____

6. Father's Name: _____

7. Father's Occupation with details: _____

8. Father's Mobile Number: _____

9. Mother's Name: _____

10. Permanent Address: _____

_____ State: _____

Pin Code: _____ Phone Number: _____

11. Address of Hostel/PG/Hired House/Room: _____

Contact Person Name & Phone No: _____

12. Local Guardian's Name: _____ Mobile No. _____

DECLARATION

I hereby declare that the information given above is correct and the university can take appropriate action against me in case any information is found incorrect.

Student Signature