



॥ त्वं ज्ञानमयो विज्ञानमयोऽसि ॥

भारतीय प्रौद्योगिकी संस्थान जोधपुर  
शैक्षणिक कार्यालय

Indian Institute of Technology Jodhpur

Office of Academics

NH 62, Nagaur Road, Karwar-342030, Jodhpur District

Phone: (0291) 280 1079; eMail: [office\\_je@iitj.ac.in](mailto:office_je@iitj.ac.in)

Form I

**Family Income Proof**  
(Income obtained in the Period from 01-04-2023 to 31-03-2024)

**(1) Govt. Organization Employees**

- (i) Salary Certificate for the Financial Year 2023-24 (from 01.04.23 to 31.03.24) in Form no.I1, duly sealed/stamped by the Salary Disbursing Officer or DDO; and
- (ii) Declaration by Parent/ Guardian in Form no. I2; and
  - a. Copy of ITR filed, ITR acknowledgment copy issued by employer for the year 2023-24 (Assessment Year 2024-25);

**(2) For Pensioners/Family Pensioners:**

- (i) Declaration by Parent (Form I2); and
- (ii) Annual Pension Payment Certificate for the financial year 2023-24 in the prescribed format (Form I3), to be issued by the Pension Disbursing Officer; and
- (iii) An Income & Non-employment Certificate from Local District Authorities like S.D.O./B.D.O./M.R.O./Tahasildar/Chairman/Executive Officer of Municipal Corporation, etc., for the year 2023-24; and
- (iv) Copy of PPO, Superannuating/ Retirement/Termination letter and attested copies of I.T documents (if any such as ITR for the year 2023-24, as applicable).

**(3) Other Persons- Except (1) and (2) above**

- (i) Declaration by Parent (Form I2); and
- (ii) An Original Income Certificate issued from Tahsildar; or
- (iii) Copy of IT Return, ITR acknowledgment copy, if applicable (to be attested by a Govt. Officer), for the year 2023-24 (Assessment Year 2024-25).

**Notes:**

- (1) In Category (1): Low-income group of salaried class, who have not submitted ITR, they have to submit an Original Income Certificate from the Employer and Tahsildar.
- (2) In Category (2): Those who retired without Pension, they have to submit Retirement/Termination/ Superannuating letter/documents/papers etc. And Income & Nonemployment certificate from local District authorities as mentioned above.
- (3) In any Category: All taxpayers must submit a copy of ITR filed and ITR acknowledgement copy or equivalent (to be attested by a Govt. Officer). Failing to submit or any discrepancy may be subjected to the legal consequences.
- (4) All the forms to be filled by both the parents in case both are working.



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Form I1

## ANNUAL INCOME CERTIFICATE FROM THE EMPLOYER

### Income from Salary:

1. Name and Address of the Employer:

2. Certified that \_\_\_\_\_ is employed in this Organization in the Post of \_\_\_\_\_, (Designation held by the employee) and that the break-up of his Gross Annual Income from Salary received in the Financial Year \_\_\_\_\_ is as follows:

ITEM	TOTAL AMOUNT FOR 12 MONTHS
1) Basic Pay	:
2) D/Pay	:
3) DA/ADA/Relief	:
4) H. R.A.	:
5) Special Pay & Honorarium, Bonus Arrears, etc., if any:	
6) Other Allowances if any	
	<b>TOTAL Rs.:</b> _____

Employer's Signature:

Designation:

Date:

(Official Seal)

### NOTE:

1. All the entries as stated above must be supported by the attested copy of ITR Form for the corresponding financial year \_\_\_\_\_ (Assessment Year \_\_\_\_\_).



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Form I2

Income from other sources:

## DECLARATION BY THE FATHER/GUARDIAN OF THE STUDENT

I declare that my/my family's (Father and Mother) Annual Income from other sources during the Financial Year (1 April 2023 - 31 March 2024) was as follows in addition to my Salary Income:

### Income from:

- (1) Landed Properties (Certificate from: Rs. ....Tahsildar/Gram Panchayat
- (2) Agriculture: Rs. ....
- (3) Investment in Bank/Post Office/Unit Trust etc.: Rs. ....
- (4) Share Certificates/Debentures: Rs. ....
- (5) Other sources: Rs. ....
- (6) Total of Salary Income: Rs. ....  
(D.A., D.P./D.Relief/HRA/honorarium, bonus special pay, arrears etc received Fin. Year \_\_\_\_\_)
- (7) In case of Businessman. /Agriculture/medical/Legal Practitioner/Consultant/Agent/Self-employed etc. as applicable (other than salaried class):
  - (i) Name & Address of the Firm: Organization/ Shop
  - (ii) Nature of Business/Trade:
  - (iii) Trade/Professional License/Registration No. (copy to be enclosed)
  - (iv) Sales Tax/ Comml.Tax Registration No./Zone:

Total Income under 7) Rs. ....

**Gross Annual Income: Rs. ....**

Further I declare that the information given above is true. I shall also be personally held responsible for the payment of concession in fee given to my ward in the event of any information proves false in this declaration and also in the enclosed form, being proved incorrect later on.

Date:

Signature of the Father /Guardian

Full Name:

Address with Pin Code:

Phone No. / Mobile No:



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Form I3

## FOR PENSIONER/FAMILY PENSIONER ONLY

(INCOME /SALARY CERTIFICATE FOR THOSE GUARDIANS WHO ARE IN PENSION  
RETIRED FROM SERVICE OR THEIR WIVES ARE GETTING FAMILY PENSION)

### PART - I: Income from Pension / Family Pension:

1. Name and address of the  
Ex-employer:  
with P.P.O. No.

2. Certified that \_\_\_\_\_ was employed in

\_\_\_\_\_ Organisation/superannuated in the capacity of \_\_\_\_\_ (post held by the retired employee) and that the break-up of his/her Annual Income from Pension / Family Pension received in the financial year \_\_\_\_\_ is as follows :

ITEM	TOTAL AMOUNT FOR 12 MONTHS
------	----------------------------

2) Basic Pension/F. Pension:

3) Dearness Relief:

4) Other Allowances,

Arrears, if any: \_\_\_\_\_

Total: \_\_\_\_\_

Signature of Pension Disbursing Authority

Disbursing Authority: \_\_\_\_\_

Designation: \_\_\_\_\_

Date:

(Official Stamp)



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Form I3

**Part - II: Income from other sources:**

**DECLARATION BY THE PARENT/ GUARDIAN**

I declare that my/my family's (Father and Mother) Annual Income from other sources during the Financial Year 2023-24 was as follows in addition to my pension income:

Income from:

(a) Landed Properties (Certificate from:  
(Tahsildar/Gram Panchayat)

(b) Agriculture: Rs.

(c) Investment in Bank/Post Office/Unit Trust etc.: Rs.

(d) Share Certificates/Debentures:  
Rs.

(e) Other sources: Rs.

Total: Rs. ....

Total of Pension Income as stated above of Part-I Rs . ....

**Gross Annual Income: Rs: .....**

Further I declare that the information given above is true. I shall also be personally held responsible for the payment of concession in fee given to my ward in the event of any information proves false in this declaration and also in the enclosed form, being proved incorrect later on.

Date:

Full Name:

Address with Pin Code:

Phone No. / Mobile No:

Signature of the Father /Guardian



**Form M**

**MEDICAL EXAMINATION REPORT FOR UG STUDENTS**

**(to be issued by a Registered Medical Practitioner)**

**General Expectations**

Candidates should have good general physique in particular.

- Chest measurement should not be less than 70 cm, with satisfactory limits of expansion and contraction.
- Vision should be normal. In case of defective vision, it should be corrected to 6/9 in both eyes or 6/6 in the better eye. Colour blind or unocular persons are ineligible for admission in Mining Engineering and Mining Machinery engineering courses.
- Hearing should be normal. Defective hearing should be corrected.
- Heart and lungs should not have any abnormality and there should be no history of mental illness or epileptic fits.

**PERSONAL HISTORY**

- Name.....
- JEE (Advanced) - 2024 Roll No. ....
- All India Rank ..... Category Rank .....
- Parent/Guardian's Name.....
- Age ..... years ..... Months.....
- Gender .....
- Identification mark on the body, if any  
(This can be a mole, scar, or birthmark) .....
- Major illness/operation if any  
(Specify nature of illness/operation) .....

Signature of the candidate



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### MEDICAL CERTIFICATE FOR UG STUDENTS

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

1. Height .....cm
2. Weight .....kg.
3. 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 .....
- (c) Colour Blindness ..... (d) Unocular 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  
.....  
.....

Fulfil the prescribed standard physical fitness and is FIT admission to Engineering/  
Architecture/Pharmaceutics /Science course

Does not fulfil the prescribed standard of physical fitness and is unfit/ temporarily unfit for  
admission due to following defects.....

Signature of the Medical Officer

Date .....

Full Name.....

Medical Registration No. ....

Official seal