

# INSTITUTE OF TECHNOLOGY MADRAS

## Revised SCHEDULE OF EVENTS

(B.TECH & DUAL DEGREE)

SCHEDULE OF EVENTS	JoSAA Rounds	DATE	Time	VENUE
Document Verification & Admission	Seats Frozen in JoSAA Rounds 1,2,3,4	25.07.2023	09.00 am TO 01.00 pm	Student Activity Centre (SAC)
		27.07.2023	09.00 am TO 01.00 pm	Student Activity Centre (SAC)
	Seats Frozen in JoSAA Rounds 4,5,6	29.07.2023	09.00 am TO 01.00 pm	Student Activity Centre (SAC)
Institute Orientation	All the Students	29.07.2023	Post-Lunch	Student Activity Centre (SAC)
<b>Commencement of Classes</b>	All the Students	<b>31st July, 2023</b>		

Note:

1) On arrival at campus, Students can report at CCW Office of the Institute to complete the formalities related to hostel accommodation. It is sufficient that they arrive on or before the date of the document verification and admission process as listed above. Students can therefore plan their travel accordingly to make use of this flexibility.

2) Due to space constraints, accommodation for the parents/ guardians accompanying students is not feasible and hence requested to plan their travel and accommodation accordingly.

3) During the days intervening the date of admission and the commencement of classes, you will have an Institute Orientation, time for Departmental visit and to settle down for your Hostel stay.

4) Student whose seat is frozen in JoSAA Round 4 may also report for Admission on 27.07.2023.

4) Parents/ guardians can also view the Institute Orientation online. The link will be available in the Institute's website, <https://www.iitm.ac.in/>

4) For Hostel Fee Structure, please visit: <https://ccw.iitm.ac.in/>

5) Request for change in the aforementioned date shall not be entertained.

6) Institute Fee payable for the 1<sup>st</sup> Semester (July-November 2023) is given in Page 2.

**Details of fees payable:**

**(Date of opening the Fee Payment Portal will be announced shortly)**

Indian Nationals (Including PIO / OCI card Holders - those whose registered as OCI before 04.03.2021)						
FEES PARTICULARS	INSTITUTE FEE – Payable Online					
	Enter IITM roll number assigned to you in the fee payment portal <a href="https://pay.iitm.ac.in/">https://pay.iitm.ac.in/</a> to pay the Institute Fee. Verify your name and Date of Birth before proceeding for payment.					
	HOSTELLER			DAY SCHOLAR		
	Total Fee Payable For 1 <sup>st</sup> Semester	Seat Acceptance Fee Less Processing Fee Of Rs.4000/-	Balance Fee To Be Paid Through Institute Fee Portal	Total Fee Payable For 1 <sup>st</sup> Semester	Seat Acceptance Fee Less Processing Fee Of Rs.4000/-	Balance Fee To Be Paid Through Institute Fee Portal
SC,ST & PWD <i>(Irrespective of Parental Income)</i>	23400	16000	7400	17400	16000	1400
GEN, OBC-NCL, GEN-EWS <i>(whose parental income is below 1 Lakh)</i>	23400	36000	NIL*	17400	36000	NIL*
GEN, OBC-NCL, GEN-EWS <i>(whose parental income is 1-5 Lakh) #</i>	56733	36000	20733	50733	36000	14733
GEN, OBC-NCL, GEN-EWS <i>(whose parental income is above 5 Lakh) #</i>	123400	36000	87400	117400	36000	81400
<b>Foreign Nationals</b>	One Time Fee (Rs.20000/-) + Semester Fee (Rs.310800/-) Institute & Library Deposit (Rs.2000/-)					<b>332800</b>
* Refund will be processed on claim by the student after 1st week of October.						
# Applicable only if a valid Income certificate is available						

## **GENERAL GUIDELINES / INSTRUCTIONS FOR DOCUMENT VERIFICATION**

Students should produce the following documents in original during Document Verification compulsorily. (No Photocopies are required)

1.	10th Class and 12th Class Marksheet. If your date of birth is not mentioned in the 10th marksheet, bring your Birth Certificate.
2.	Category Certificate (GEN-EWS, OBC-NCL, SC, ST – If applicable)
3.	PwD Certificate (if applicable)
4.	Proof of certificate for OCI
5.	Passport & Visa (for Foreign National only)
6.	JEE Admit Card
7.	JOSAA Seat acceptance letter
8.	Income certificate (whose parental income is upto 8 Lakhs per annum) obtained from Tasildhar, Revenue Department *
9.	Medical Certificate as per Annexure I
10.	Welcome Letter from IITM JEE Office

\* Please note: The Income Certificate is to be furnished only if you are likely to seek concession in Tuition Fee/ to apply for Scholarships. The concession/ scholarship is subject to eligibility and availability. Mere submission of the Income Certificate shall not make a student eligible for the same.



Medical Examination Report

Medical History and personal particulars of Students joining at IIT Madras

Name of the Candidate (in Full):-.....

JEE (Advanced 2023) /IAT Registration Number..... IIT M Roll Number.....

Name of the Parent /Guardian.....

1. Do you suffer from any allergies including Drug Allergy Yes / No

If yes Specify \_\_\_\_\_

2. Do you have any medical problems (circle as appropriate) : Heart disease / diabetes / Thyroid / Skin disease /Bronchial asthma/Seizure Disorder or Epilepsy/Others (specify)

Yes / No

If yes give details \_\_\_\_\_

3. Are you able to see well Yes / No

If there is a visual defect has it been corrected by suitable Spectacles Yes / No

4. Do you suffer from any hearing disability Yes / No

5. Do you suffer from any loco motor or movement disorder or any loss of body part

Yes / No

If Yes Details \_\_\_\_\_

6. Are you currently on any long term medications or have a history of long term (>2months) use of medication

Yes / No

If yes details \_\_\_\_\_

7. Any history of surgeries in the past Yes / No

If yes details \_\_\_\_\_

Identification Marks

1. \_\_\_\_\_

2. \_\_\_\_\_

I declare that all the statements above are true, correct and complete to the best of my knowledge. I fully understand that I am responsible for the accuracy of all the statements given.

Date:  
Place:

Candidate's Signature: .....  
Parent/Guardian's Signature: .....

## Health Certificate

### Clinical Examination by a general Physician.

Weight ..... Kg.                      Height ..... cm.                      Blood Pressure ..... /.....mm Hg.

Girth of Chest: (a) At rest .....                      (b) After deep inspiration .....

Pulse Rate: .....per minute                      BP .....mmHg

Eye Test:    Vision - Normal/Defective    Corrected by Spectacles: Yes/No

ENT: Hearing (Whisper Test): Normal/Defective

Nose .....                      Throat .....

Respiratory System: .....                      Cardiovascular System: .....

Neurological System: .....

Psychological Assessment: .....                      Abdomen: .....

Past Medical / Surgical history:-

H/o Allergy                      Yes / No                      Current Medications if any:-

Vaccination Details		No. of doses	Date of Last Injection
1.	BCG		
2.	Diphtheria/Pertussis/Tetanus (DPT)		
3.	Mumps, Measles, Rubella		
4.	Hepatitis B		
5.	Typhoid		
6.	Chicken Pox		
7.	Covid 19 Vaccination		

### Investigations

Name of the Investigation		Remarks/Report with date
1.	ECG	
2.	Chest X-Ray	

### Blood Test/ Urine Test

1.	Blood Group& Rh Typing	
2.	Hemoglobin	
3.	Peripheral Smear	
4.	Random Blood Sugar	
5.	Serum Creatinine	
6.	HIV – I &2	
7.	HBsAg	
8.	Urine Routine examination	

I, Dr. .... after clinical assessment (with necessary investigations) of Mr/Ms.....  
Son/Daughter of Mr/MS. .... declare him/her fit/unfit, mentally and physically to pursue higher education with a very tight academic schedule. I further declare that he/ she does not suffer from seizure disorder or any other major medical illness preventing him/her from undertaking sports including swimming.

Date:

Signature & Seal

Place: