

Academic Year 2017-19

Form No.: _____

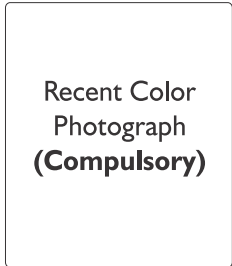
APPLICATION FORM
POST GRADUATE DIPLOMA IN MANAGEMENT
 2 Year Full Time Programs Approved by A.I.C.T.E.

- **PGDM**
- **PGDM - Marketing**
- **PGDM - Finance**
- **PGDM - Human Resources**

Roll No.:
Date of Exam:

Important Instructions :

- 1) Form should be filled in by candidate only in clean legible handwriting.
- 2) Form should be filled in block letters only (except e-mail). Leave one block between each word.
- 3) Application should be submitted, complete in all aspects along with the application fees of Rs. 900/- by Cash or Demand Draft favoring MITSOB, payable at Pune.
- 4) Incomplete forms shall not be accepted.
- 5) Please mention correct address on envelope (indicated on last page)



Name	Middle Name	Surname

(As per the previous statement of marks)

Mother's Name

Date of Birth Age Yrs.

Sex: Male Female Marital Status : Married

Nationality Unmarried

Email (Compulsory) : I) _____

Mobile No.

Emergency Contact No.
(Parent, Local Guardian)

Correspondence Address

City Pin Code

State Phone (with STD Code)

Permanent Address (Post selection communication will be sent to this address)

City Pin Code

State Phone (with STD Code)

Occupation of Relation / Kin (In brief)

Relation	Education	Occupation	Annual Income
Father			
Mother			
Brother			
Sister			

How did you know about the course?

- Through press advertisement (Newspaper, Magazine etc.) _____
- Your visit to the Institute
- Word of mouth (Please Specify) _____
- MITSOB Website
- Others Website _____
- Others (Please Specify) _____

**Why would you choose to study at MIT-SOB? What are your career plans?
(Max. 50 words)**

Academic Details

Qualification	Name of University / Board	Name of Institution / College	Marks			Year of Passing
			Obtained	Out of	%	
10 th Std.						
12 th Std. (10+2)						
* Graduation / Degree (1st Year) _____						
Graduation / Degree (2nd Year) _____						
Graduation / Degree (3rd Year) _____						
Graduation / Degree (4th Year) _____						
Post Graduation Degree (if any) _____						

* - Please mention name of the course / degree.

Details of appearance at CAT / MAT / CMAT / XAT / ATMA / MH-CET (Enclose Score Card copy)

Exam Month Year Score Percentile

Registration No.: _____

CHOICE OF COURSE (Compulsory)

COURSE	Applied (To be filled by Candidate)	Allotted (Office use only)
PGDM	<input type="checkbox"/>	<input type="checkbox"/>
PGDM - Marketing	<input type="checkbox"/>	<input type="checkbox"/>
PGDM - Finance	<input type="checkbox"/>	<input type="checkbox"/>
PGDM - Human Resources	<input type="checkbox"/>	<input type="checkbox"/>

* Candidate can choose minimum 1 and up to 4 courses in order of preference e.g. '1' for first preference, '2' for second preference and '3' for third preference & '4' for fourth preference. Total score obtained by candidate will be compared against score required for allotment of course, taking into account preferences mentioned above.

Kindly complete both sections of admit card as given below

POST GRADUATE DIPLOMA IN MANAGEMENT ADMIT CARD

Name of the Candidate: _____

Date of Selection process: _____

Verified by: _____
(Signature of Admissions officer)

Roll No.: _____



MIT SCHOOL OF BUSINESS (APPROVED BY A.I.C.T.E.) POST GRADUATE DIPLOMA IN MANAGEMENT ADMIT CARD

Name: _____

Date of Selection process: _____

Students Signature: _____

Roll No. _____
(To be entered by Admissions officer)

Recent Color
Photograph
(Compulsory)

Authorised sign.

Work Experience (If any after graduation)

Please list the work positions you have held, including different positions within the same organisation:

Position	Organisation	Location	From	To

Declaration:

- I have read and understood details of PGDM program mentioned in institute's brochure.
- I hereby declare that all statements made in this application are true, complete and correct. In the event of any information being found false or incorrect or ineligibility being detected before or after selection, action may be taken by the Institute as deemed fit against me.
- Ragging: I hereby declare that I have not been expelled or debarred from admission in any Institution in the country on account of being found guilty of abetting, or being part of a conspiracy to promote ragging, and further affirm that, in case the declaration is found to be untrue, I am aware that my admission is liable to be cancelled.

Date : ___ / ___ / ___

Signature of the Candidate

Please attach copies of the following documents

Document (Attested)	Remarks
Photocopy of 10 th Std. Mark Sheet	<input type="radio"/> Yes <input type="radio"/> No
Photocopy of 12 th Std. Mark Sheet	<input type="radio"/> Yes <input type="radio"/> No
Photocopy of Graduation Mark Sheet	<input type="radio"/> Yes <input type="radio"/> No
Photocopy of Post Graduation Mark Sheet	<input type="radio"/> Yes <input type="radio"/> No
Photocopy of Work Experience (If Applicable)	<input type="radio"/> Yes <input type="radio"/> No
Photocopy of MAT / CAT / MS - CET Scorecard	<input type="radio"/> Yes <input type="radio"/> No
Photocopy of Identity Proof (Compulsory)	<input type="radio"/> Yes <input type="radio"/> No

Mode of Payment (For office use only)

Cash Demand Draft

DD No.

Receipt No.

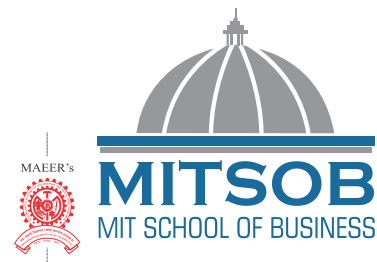
Accounts Signature _____

Signature
Asst. Registrar

Signature
Director

INSTRUCTIONS

- Candidate should possess Admit Card during examination and produce the same if required by the Invigilator. No candidate will be allowed to appear for the exam without Admit Card.
- Every candidate should carry an Identity proof in original (Eg: Driving Licence, PAN Card, College I-Card) with him at selection process venue.
- This Admit Card is valid for only one appearance at the selection process.
- For any assistance, please contact Admission Office on the following numbers:
09922487669 / 09922487671 / 8605003969



**MAEER's
MIT School of Business, Pune, India.**

(APPROVED BY A.I.C.T.E.)

MIT Campus, Paud Road, Kothrud, Pune - 411 038. (India)
Tel.: (office) +91-20-30273602 / 01 Fax : +91-20-25442770
E-mail : pgdmsob@gmail.com Website: www.mitsob.net