



INSTITUTE OF MANAGEMENT

Education & Consultancy

Approved by A.I.C.T.E, MHRD, Govt. of India
Bindukhera Rd. (Opp. to RAVE cinema), Rudrapur
Contact us: 9811749947/ 9999988515/5944249009
www.ImecRudrapur.in : info@ImecRudrapur.in

ADMISSION FORM : PGDM

NAME (in block letters):

DATE OF BIRTH (DD/MM/YEAR):

GENDER (M/F):

MARITAL STATUS (M/UM):

CATEGORY (Gen/SC/ST/OBC/DA):

PARENT DETAILS:

Father's Name:

Father's Occupation:

Father's telephone (M):

Mother's Name:

Mother's Occupation:

Mother's telephone (M):

PERMANENT ADDRESS (with pincode):

MAILING ADDRESS (with pincode):

**Affix passport size
photograph(sign
across the photo)**

ACADEMIC RECORD

QUALIFICATION	PASSING YR.	NAME OF SCHOOL/BOARD & PLACE	MAJOR SUBJECTS	MARKS OBTAINED	MAX. MARKS	% AGGR.
Class-10						
Class-12						
UG degree						
PG degree if any						
other recognized degrees/certificates/courses (if any)						

LIST work experience & nature of work (if any): Attach annexure

LIST AWARDS/SCHOLARSHIPS/ACHIEVEMENTS (if any): Attach annexure

HOW DID YOU HEAR ABOUT IMEC-RUDRAPUR (website/newspaper/coaching center/internet/other sources):

DO YOU HAVE ANY MEDICAL CONDITION OR CONCERNS (if Yes please specify):

DECLARATION (by candidate)

I hereby declare that the particulars given in this application are true to the best of my knowledge & belief. If admitted, I agree to abide by the rules & regulations of IMEC as may be enforced from time to time. I further understand that any information furnished falsely will be sufficient ground for my admission cancellation & or expulsion from the institute.

Applicant's signature

Date & Place