



ASM Group of Institutes

Institute of Business Management & Research (IBMR)

Permanently affiliated to University of Pune & approved by AICTE, Govt. of India

MIDC, Block 'C', Chinchwad, Pune 411019

Tel: +91-20-27475090, 27478666 | Fax : +91-20-27471753

Email: ibmrc@vsnl.in | www.ibmr.org

Admission Application Form

Batch 20.....

Form No.

Course Applied for :

Full-Time Programs of University of Pune

MCA

MCM

MMM

MBA

MPM

Please attach
your recent
passport size
photograph here.

Do you want a Hostel Accomodation?

Yes

No

Entrance Exam Details

CAT

MAT

ATMA

MHCET

Roll No. _____ Composite Score _____

Percentile _____

Any other (Please specify) _____

Note : Photographs would be taken & the entire information of this form would be scanned. Therefore, please write clearly in block letters.

General Information (Please fill up the columns in capital letters only)

1. Name (as it appears on official documents, school records, passport, etc.)

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Surname

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First Name

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Middle Name

2. Gender

Male

Female

3. Marital Status

Single

Married

4. Date of Birth (Day / Month / Year)

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5. Graduated From

Maharashtra

Outside Maharashtra

6. Nationality

7. Category Open ST SC OBC DTNT

Caste & Sub caste : _____

8. Do you have a passport Yes No.

Passport No.

Date of issue

9. Father's (Guardian's) Name

Surname

First Name

Middle Name

Mothers Name :

Surname

First Name

Middle Name

10. Father's / Guardian's Occupation _____ Designation _____

Company Name _____ Salary/Income (p.a) _____ PAN no. _____

11. Address

Permanent Address	Correspondence Address (compulsory)
City:	
State:	
Pin Code:	
Contact Details (a) STD Code:	(b) Telephone Number:
(c) Mobile Number:	
(d) Email Id* :	
(e) Facebook profile link :	
(f) LinkedIn profile link :	

*(Email ID is mandatory)

12. Academic Profile :

(Please list in chronological order including examinations with results pending)

Sr. No.	Name of the Examination Passed	School/College/ Institution	Examining Board/ University	Seat/Roll no.	Exam Date		Degree	Results (Grades/ Percentage)
					Month	Year		
A	Std.X							
B	Std.XII							
C	Graduation							

Any other Qualifications (please specify)

D	Course Name							

13. Extra & Co-curricular Activities

Mention the significant achievements in extra & co-curricular activities. Only those which are certified need to be listed here, attach a separate sheet if required.

Sr. No.	Achievements	Level	Year	Certificate Details

14. Please list your Strengths & Weaknesses

Strength	Weakness

15. Hobbies and Interests

16. Please state your long term career goals

17. Full time work experience

For those with full time job experience undertaken after graduation through a valid appointment order of a recognized company with proper terms and condition including salary and work experience details. The job profile should associate with sales, marketing, human resource, operations, finance and information technology.

Sr. No.	Designation	Nature of Work	Company's Name & Address	Duration		Total Pay (Rs./ Month)
				From - To (mm/yy)	(mm/yy)	

18. Medical History

Blood Group : _____

Please state below any illness/allergies that you may have along with the medication that you have been prescribed.

19. Declaration by the Candidate of all the informations :

1. I, hereby, submit myself to the disciplinary authority of the Institute and to rules laid down by concerned competent authorities. I am aware of the fact that I need to maintain the requisite attendance for the academic and other activities by virtue of my being a student of this Institute, failing which the Institute has the full and final authority to initiate disciplinary action against me, as per the rules and regulation of the competent authority. I hereby agree to comply with all the rules and regulations of the Institute. In case of any dispute I agree that the decision of the Institute authorities will be final and binding on me.
2. I and my parents/guardian have carefully noted the eligibility rules, procedures of admission, rules and regulations, important notes for fee refund, submission of certificates etc. given in the IBMR prospectus which I am required to follow and shall in matters on interpretation accept the decision given by the Management in this respect as final and binding.
3. I shall submit all the required original certificates, attested copies of certificates for clearance of eligibility, fill the exam forms and pay the entire tuition fees, exam fee and other fees at the earliest before the last mentioned date by the Institute and University of Pune failing which I alone will be responsible for further consequences. If I am found to have furnished false information or suppressed material information I will, if admitted, be dismissed and my fees will be forfeited.
4. I will maintain a minimum attendance of 75% per semester failing which my term may not be granted and I will not avail the placement facilities of IBMR.
5. I fully understand that the Management of the Institute has full liberty to expel me from the Institute for any infringement of the rules and regulations of conduct and discipline given in this prospectus.
6. The information given by me in my application is true to the best of my knowledge and belief.
7. I am aware that the institute reserves the right to change the names of courses or cancel a course as per Govt. regulations.
8. I agree to pay/refund any changes in the fees, taxes or other charges that may have occurred due to changes in Shikshan Shulka/University/AICTE/DTE or any other relevant authority regulations.

_____ Date

_____ Place

_____ Signature of the applicant

Note:

1. All disputes subject to the legal jurisdiction of Pune city.
2. Documents to be submitted along with the form (attested photocopies of 10th, 12th, graduation mark sheet & if appearing for final year please provide with 1st year and 2nd year mark sheet, photo ID proof, two photographs and relevant score card.)
3. Please issue a DEMAND DRAFT of Rs. 1200/- for prospectus by hand or Rs. 1250/- for prospectus by post, drawn in favour of the Director, IBMR, Chinchwad, Pune-19, payable at Pune on or before the stipulated date.

FOR OFFICE USE

Date & centre of PI attended: ----- Admission fee Receipt no: -----

Amount of fee paid : ----- Course admitted in: -----

Principal / Director : -----

Counsellors: ----- Referred by : -----