



APEX INSTITUTE OF MANAGEMENT AND RESEARCH

186/2/1, Nemawar Road, Hansakhedi, Front of Gandhi Cold Storage, Indore (M.P.) INDIA
CORPORATE OFFICE: UG - 12, ROYAL PLATINUM SCHEME NO.54, INDORE- 452-010
Campus Phone No.: 73899-19196, 73899-19190 Corp. Office Phone No. : 0731 - 6560770
Email:director@aimrindore.com, info@aimrindore.com; Website: www.aimrindore.com

Application Form No: _____

Academic Year _____

Enrollment No. : _____

Recent Passport Size Color Photograph of Student									

STUDENT APPLICATION FORM

(MBA Course)

01. STUDENT'S NAME : [First Name, Middle Name, Surname] in Block Letters

02. FATHER'S NAME: [First Name, Middle Name, Surname] in Block Letters

03. MOTHER'S NAME: [First Name, Middle Name, Surname] in Block Letters

04. PERMANENT ADDRESS _____

PIN CODE _____

05. PHONE NO. WITH STD CODE : _____

06. ADDRESS FOR CORRESPONDENCE : _____

PIN CODE _____

07. GRADUATION COURSE: _____ SPECIALIZATION: _____

08. MOBILE NO (PARENTS ONLY) : _____ (STUDENT) _____

09. E-MAIL (PARENT) _____ (STUDENT) _____

10. DATE OF BIRTH: (DD/MM/YY) ____/____/____ 11. SEX: MALE / FEMALE _____

12. RELIGION: HINDU/ MUSLIM / SIKH / CHRISTAN / OTHER _____ NATIONALITY: _____

13. CASTE (Please ✓ Tick) : GEN SC ST OBC

14. FATHER'S OCCUPATION: _____

15. FATHER'S/GUARDIAN'S ANNUAL INCOME: _____

16. ELIGIBLE TO THE SCHOLARSHIP: YES/ NO

17. SCHOLARSHIP LAST SANCTIONED AMOUNT: _____

18. STUDENTS' EDUCATION QUALIFICATION DETAILS:

S.No.	Class	Board/University	Institution Name	Percentage	Year of Passing	Division/Grade	Remarks
1	10 th						
2	12 th						
3	Grad.						
4	Post Grad.						
5	Diploma/Others						

Signature of Student

Signature of Parent

VERIFICATION FOR DEPARTMENT

Documents:

S.NO.	Documents Needed	Submitted	Non-submitted	Remarks
1	10 th Mark Sheet Copy			
2	12 th Mark Sheet Copy			
3	Graduation all semesters Mark Sheet Copy			
4	Post Grad. Mark Sheet Copy			
5	M.P. Domicile			
6	Transfer Certificate (Original)			
7	Migration Certificate (Original)			
8	Caste Certificate (SC/ST/OBC/Minority)			
9	Income Certificate (SC/ST/OBC/Minority)			
10	Aadhar Card			
11	Gap certificate			
12	Rs. 10 Stamp for declaration			
13	Colored Photographs (10)			

REMARKS:

Name of Faculty: _____

Department: _____

Signature of Faculty: _____

Office use

Fees Paid: cash/DD/Check

Amount Paid: _____ Amount Remaining: _____

Declaration by student:

I hereby declare that, the above stated information is correct to the best of my knowledge and belief. And I take the sole responsibility of all.

Sign.: _____

Name of Student: _____

Anti-ragging Declaration: I hereby declare that I will not involve myself in any activity related to or concern to ragging and anti-social. If I found indulge in any such activity, I should be handed over to police. (*Ragging is an offence.)

Conditions:

- 1) He/She should not have involved, directly or indirectly in ragging either in the campus or outside.
- 2) He/She should not have been found to be involved in mass bunking, directly or indirectly.
- 3) He/She should not have been caught for malpractice in university exams.
- 4) He/She should not have been reported by concerned HOD for any misbehavior either in the Class/lab or in the campus.

Work Experience details (in chronological order):

S.No.	Company Name	Position Held	Total years of service	Address	Package	Remarks
1						
2						
3						
4						
5						