

People Institute Of Management Studies

EMS Akshragramam, Munnad(PO),
Chengala (Via) Kasargod 671541
www.pims.ac.in E-mail- peopleinstitute@gmail.com
Phone : 04994-207400

Form Sr.No:

Application ID:
(For office use only)

Student Roll No:
(For office use only)

Application Form.

MASTERS IN BUSINESS ADMINISTRATION (MBA) 2018-2020

This application form is to be filled out in its entirety. The information you provide in this application form is a very important part of the admissions process and therefore accurate and complete answers to the questions are required. Any admission granted on the basis of falls information will be cancelled.

FILL THIS FORM IN CAPITAL LETTERS ONLY

Applicant's personal Details

Name:

(as it appears in your SSLC Certificate)

Date of Birth:

| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|
| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|

Sex: Male Female

PHOTO

D D M M Y Y Y Y

Religion:

Caste

Specific categories: General SC ST OEC OBC

Marital Status: Single Married

Address for Correspondence

.....
.....

_____ District _____ State _____

Pincode:

Phone :

(STD/ISD Code)

(Number)

Mobile:

E- mail id

Permanent address.

District _____ State _____

Pincode:

Phone :

(STD/ISD Code)

(Number)

Membership in organizations (Like NCC,NSS,IEEE etc)

1-----

2-----

3-----

4-----

Test Scores-Please list your score for the competitive entrance test you have taken, leave the column blank if not applicable. Candidate should necessarily submit CMAT score card

| Test | Register Number | Composite | |
|------|-----------------|-----------|------------|
| | | Score | Percentile |
| | | | |

Work Experience-Paid employment after graduation only (mention full time/part time employment. Do not include training/project /work done as an integral part of curricular requirement.

| Organisation | Designation | Duration | | Nature of work | Remunerations/ month |
|--------------|-------------|----------|----|----------------|-------------------------|
| | | from | to | | |
| | | | | | |

Total work experience: _____ Year _____ Months

Academic Record -Provide complete information on examination marks. Marks stated here must tally with those in the original marks sheets percentages must be computed by including all subjects / papers / parts that you took in your exams. if your results are awaited, leave the relevant columns blank.

| Level | Name of the institution | University/board | Specialization | Duration | | Percentage of marks |
|--------|-------------------------|------------------|----------------|----------|----|---------------------|
| | | | | From | to | |
| PG | | | | | | |
| UG | | | | | | |
| HSC/+2 | | | | | | |
| SSLC/X | | | | | | |

| Grading System | | | Mark System | | |
|----------------|-------------|-------|-----------------------------------|------------|------------|
| Semester I | Grade Point | Grade | | Total Mark | Percentage |
| Semester II | | | | | |
| Semester III | | | First Year | | |
| Semester IV | | | Second Year | | |
| Semester V | | | Third year | | |
| Semester VI | | | Detail of Technical course if any | | |
| Semester VII | | | | | |
| Semester VIII | | | Detail of PG course if any | | |
| CGPA | | | | | |
| GRADE | | | | | |

| | | |
|--|--------|---------------|
| Are you a former student in any of the institution managed by KCES(If yes give details) <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| Institute | Course | Year of study |
| | | |

| | | | |
|--|----------------|---------------|----------------|
| Do you have Passport(If yes give details) Yes <input type="checkbox"/> No <input type="checkbox"/> | | | |
| Passport Number | Place of issue | Date of issue | Date of expiry |
| | | | |

| | |
|-----------------------------|-------------|
| Family Details | |
| Father's Name : | Occupation: |
| Mother's Name: | Occupation: |
| Husband's/ Wife's name : | Occupation: |

| | | |
|--------------------------------------|------------------------------|-----------------------------|
| Do you want Hostel Facility: | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Do you want transportation Facility: | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

| | |
|---|----------------------------|
| Declaration of Student | |
| Ihereby undertake, that if I am admitted to the institute, I will abide by the rules and regulations of the institute and will do nothing either inside or outside the college that will interfere with its orderly working, discipline and reputation. | |
| I do affirm that all information furnished in this application is correct to the best of my knowledge and belief. | |
| PLACE..... | |
| DATE..... | SIGNATURE OF THE CANDIDATE |

Declaration of Parent/ Guardian

If my son/ daughter/ward----- is admitted to the institute,
I----- hereby take responsibility for his/her good conduct
and discipline within and outside college.

PLACE:

DATE:

SIGNATURE OF THE PARENT/GUARDIAN

Note: The filled in application form must be submitted to the DIRECTOR, PEOPLE INSTITUTE OF MANAGEMENT STUDIES, EMS AKSHARA GRAMAM, MUNNAD(P.O), KASARGOD,KERALA- 671541

Check list for Candidates

- Enclose two Self-Addressed envelops (26.5cm * 11.5cm) with stamps Rs10/- each.
- Those who submitted downloaded application have to enclose DD worth Rs 550/- in favour of 'People institute of management studies' payable at Kasaragod.
- Candidates belonging to SC/ST/OBC category have to attach Community Certificate.

| FOR OFFICE USE ONLY | |
|------------------------------------|-----------|
| Marks scored in Group Discussion | |
| Marks scored in personal Interview | |
| Details of DD | |
| Community | |
| Hostel Needed | Yes / No |
| Transportation facility needed | Yes / No |
| Remarks | |
| Coordinator(Admission) | Registrar |
| | |

Admission Granted/rejected to _____.

PRINCIPAL PIMS.