

# APPLICATION PROFORMA



## INSTITUTE OF BUSINESS AND RETAIL MANAGEMENT

ISO 9001 : 2008 CERTIFIED INSTITUTION

■ Application for admission to : \_\_\_\_\_

■ Specialization in (Compulsory) \_\_\_\_\_

■ Full Name in Block Letters

(Surname)

(First Name)

(Middle Name)

■ Date of Birth (Day/Month/Year)

■ Male :  Female :  Married :  Unmarried:

■ Nationality :

Father / Husband's Name :

(Surname)

(First Name)

(Middle Name)

■ Address for correspondence :

Permanent Address :

■ Telephone No.: (R)

Telephone No.: (O)

Telephone No.: (M)

■ E-mail (IN CAPITAL)

■ **ACADEMIC DETAILS :**

Examination Taken (Please list in chronological order including examinations with result pending.

Degree	Name of the Institute/college/School	Exam Date		Subject/ Specialization	Results/ Grade/ Percentage
		Month	Year		

■ **Work Experience ( starting with the recent one ):** \_\_\_\_\_

\_\_\_\_\_

■ **Exam option:** a) From Home [  ] b) Study center [  ] c) Online [  ]

■ **You came to know about this course through**

(a) News Paper [  ] (b) IBRM Student [  ] (c) Internet [  ] (d) Any other means [  ]

■ **Payment Details :**

Fee Paid Rs. \_\_\_\_\_ Cash / D.D. / C.C. / Cheque No. \_\_\_\_\_

Bank \_\_\_\_\_

■ **INSTRUCTION**

The application form should be accompanied with the required fee crossed demand draft

Drawn in favour of **INSTITUTE OF BUSINESS AND RETAIL MANAGEMENT,**

Payable at Mumbai.

■ **DECLARATION**

I have carefully read the Academic and Administrative Rules and Regulations of IBRM Correspondence Programs as given in the information brochure and agree to abide by the same. I hereby that if I am enrolled in the program applied, I agree to pay balance of fee instalments on specified dates. Once the admission is confirmed, refund of fees wont be possible. I further declare that the information provided by me in the application is true to the best my knowledge and belief. A list enclosure is attached with this application form.

Signature \_\_\_\_\_ Place \_\_\_\_\_ Date \_\_\_\_\_

**For Office Use Only**

Application Received on \_\_\_\_\_ Enrolment No. \_\_\_\_\_

Program \_\_\_\_\_ Receipt No. \_\_\_\_\_

Date \_\_\_\_\_ Rupees \_\_\_\_\_

Mode of Payment \_\_\_\_\_

date of next fee Instalment (if any) \_\_\_\_\_

\_\_\_\_\_ Dy. Director (Adm.)