



SASMIRA'S SCHOOL OF BUSINESS

Sasmira Marg, Worli, Mumbai – 400030

(Approved by All India Council for Technical Education (AICTE), New Delhi, Directorate of Technical Education (DTE), Mumbai, Maharashtra & Government of Maharashtra)

FOR OFFICE USE ONLY

Form No	Application Received by	Date	Code No.

APPLICATION FORM

Instruction: the application form has be filled in capital letters by the candidate in his own handwriting. Incomplete forms may be rejected.

SECTION A-

NAME OF THE PROGRAMME:

POST GRADUATE DIPLOMA IN MANAGEMENT (PGDM)

(AICTE Approved Two Years Full time Programme)

Academic Year:

Paste your
Coloured
passport size
photograph here

SECTION B - General Information

1] Applicant's Information

Name of the candidate (in English):					
Name of the candidate (in Marathi/Hindi):					
Date of Birth (mm/dd/yy):		Birth Place:		Birth State:	
Gender:		Blood Group:		Nationality:	
Religion		Category (SC/ST/EBC/O BC/NT/DT/General)		Caste	
Aadhar No		Email		Phone No.	
Whether Physically Challenged	Yes/ No	If Yes, please state the nature and extend of handicap			

Permanent Address:	
	Pin Code
Address for Correspondence:	
	Pin Code

2] Parent's Details

	Father	Mother
Name		
Mobile No		
Email		
Occupation		
Name of Organization		
Designation		
Total Annual Income		

Section C: Educational Details

Name of the Examination	Board/ University	Name of the College /Institution	Year of Passing	Major Subjects	Class/ Hons Distinction	% of marks
1. Matriculation / SSC Examination						
2. HSC / Higher Secondary						
3. B.A./ B.Sc. / B.Com. / B.Tech. / Equivalent						
4. PG Degree / Diploma Specify if any						
5. Any other Degree						

6. **Have you undergone any Course / Training in Computers? Yes/ No**

Specigy Duration:

Institution:

Degree/ Diploma:

Year / Month of Passing:

Section D: Work Experience In chronological order

Designation	Name of the Organisation	Period of Service		Nature of the Job
		From (Date)	To (Date)	

Section E: Other Information**1. Have you appeared for any Entrance Examination? (Please Tick)**MH- CET ☐CAT ☐MAT ☐

Any Other Please Specify: _____

If yes, mention your-

Roll No./ Registration No.: _____

Month/ Year: _____

Percentile Score: _____

2. Please mention the source from which you came to know about the Sasmira's Business School-

- a. Newspaper
- b. Magazines
- c. SMS Received
- d. Emails received
- e. Through Friends
- f. Any Other Source: _____

3. Please state briefly why you want to take up management as a career (not exceeding 50 words)

4. Hobbies: _____**5. Emergency Contact Details-**

Mr./Ms. _____

Phone No. (Residence): _____ (Office): _____

Relationship With: _____

6. Any other information the candidate would like to provide:

Declaration by the Candidate

I declare that the information furnished in this application is true and complete to the best of my knowledge and belief. I understand that the provision of incorrect information or withholding of any information of my academic record may result in the withdrawal of my admission offered by the institute and this withdrawal may take place at any stage during the tenure of the course.

I recognize that this application is submitted and received on the understanding that the institution may obtain records with respect to my application form from my college/University or previous employer.

I declare that I will abide all the present rules and regulations with of the Institute, AICTE and SASMIRA Trust and also as mended from time to time.

Date:**Signature of the Applicant****Place:**
_____**Undertaking by Parent**

I, Mr./Ms./Dr. _____ have fully read the information given above and affirm that, it is true. I understand, if it is proved that the given information is fraudulent, my wards application may be rejected and admission may be canceled at any time.

Date:**Signature of the Father/Mother/Guardian****Place:**
_____**For Official Use Only**Eligible for Admission in PGDM Year 1st/2nd for the Academic Year _____

Batch _____ Fees Paid _____

Date _____ Receipt No. _____

Signature of the Admission I/C**Signature of the Director****Name:****Date:**