

5. Co-curricular Activities, Hobbies & Interests :

(Please indicate special achievements & awards, if any)

6.

ADDRESS FOR CORRESPONDENCE	PERMANENT ADDRESS
City : _____	City : _____
Pin Code : _____	Pin Code : _____

7. Contact Information

a) STD Code and Telephone Number : _____

b) E-mail Address : _____

c) Name of the local guardian : _____

Address, phone no & profession _____

8. a) Identification mark on body _____

b) blood group _____

c) References : name, address, phone no. with STD Code & profession of two respectable persons

i) _____

ii) _____

9. I am enclosing Demand Draft of Rs.1050/- (non refundable) bearing No. _____ Dated _____

drawn on (name of the bank) _____ in favour of

“Indian Institute of Management Training” payable at **“Pune”** towards cost of application.

Certificate of Undertaking

1. **I am fully aware and agree that the fees & any charges once paid will not be refunded or transferred under any circumstances, and refund will not be asked for except the amount of deposit.**
2. I am aware that 2 years / 1 year full time PGPM is not approved by UGC or AICTE or Any Govt. It is a specially designed job oriented course by Indian Institute of Management Training, Pune.
3. I have checked details of the course and am satisfied with the same and after that applied for the course.
I am fully responsible for my own decision.
4. I declare that the information given by me in this application is true to the best of my knowledge and belief.
5. I hereby undertake to abide by the instructions contained in the Information Brochure & all the disciplinary rules of the institute made from time to time & authorize the Director to initiate any suitable action. I will not infringe the rules and the regulation laid by the Institute from time to time and I accept that **for all disputes including consumer court Legal jurisdiction is Pune city only.**
6. If I do not get my name removed from the roll of the institute / college by giving an application to the Director, I will be treated as on roll of the college for purpose of the realization of dues even for the period of absence.
7. If Govt. of India or any statutory body or University stops any course for any reason whatsoever, then I will not hold the Institute responsible for the same.
8. Taxes / duties / charges of State / Central Govt. / any corporate bodies if applicable will be charged extra at actuals from me. There may be changes in the same from time to time.
9. In case I don't Clear / Pass Graduation before commencement of the course, I undertake that my admission and admission fees paid will be forfeited.
10. I confirm that I have passed graduation from statutory university recognised by UGC and that all the information given by me is true to the best of my knowledge and belief. If information is found incorrect then I know that my admission will be cancelled. I accept that in such a case all fees & charges paid by me will be forfeited.
11. I confirm that I am physically and mentally fit to undergo rigorous work for 12 to 14 hours per day for Two years without any holiday during Post Graduate Programme at Indian Institute of Management Training, Pune.
12. We do not conduct Foreign University courses. Owing to the excellence of curriculum **Swiss School of Management** (Switzerland) has validated our courses and will award MBA Degree to our students who opt for this particular course.

Place :

Date :

x
(Signature of Parent / Guardian)

x
(Signature of the applicant)

Name : _____

Name : _____

Mobile : _____

(If Guardian give relation with the student) _____

List of Attested copy of Documents to be attached with Application form

- | | |
|---|--|
| 1) Graduation 1 st , 2 nd & 3 rd year Marksheets | 2) H.S.C. / XII th Marksheet |
| 3) S S C. / X th Marksheet | 4) Migration Certificate from University |
| 5) Degree Certificate | 6) School Leaving Certificate |
| 7) Character Certificate | 8) Educational Gap Certificate |
| 9) Caste Certificate (S.C./OBC/Other scheduled casts) | 10) N C.C. /N.S.S. Certificates |
| 11) Photographs (8 Copies) | 12) Tranfer Certificate |

FOR OFFICE USE ONLY

Ent. Test / GD / Int. No.: _____

GDPI Place _____

Rank : _____

Admit / Do not Admit

Remarks : _____

Office Suptd : _____

Director (admission)