





## EMPLOYMENT DETAILS

(IF EMPLOYED) Please mention your previous jobs also.

Name of the Organisation	Designation	Duration		Months / Years
		From	To	

Total years of experience : \_\_\_\_\_

## DECLARATION OF THE APPLICANT

I hereby declare that all the particulars stated in this application are true to the best of my knowledge and belief. I have read and understood all the provisions of the prospectus and agree to abide by it. In the event of suppression or distortion of any fact like educational qualification, nationality, study period etc., made in this application form, I understand that my registration or admission is liable to be cancelled at any stage. I also agree that fees paid by me to the Institute are non-refundable under any circumstances.

Date : \_\_\_\_\_

Place: \_\_\_\_\_

Signature of Applicant

## CHECK LIST

Please tick (✓)

1. Marksheets.
2. School Leaving Certificate or any academic proof for date of birth
3. Details of professional qualifications/ experience certificate if any.
4. Degree / Diploma Certificates.
5. Photograph (3 copies)

**FOR OFFICE USE ONLY**

Name of the Study Center

Center Code

I recommend Mr./Mrs./Miss

for the above mentioned course.

Total Fees Rs.

Fees received Rs.

Balance Fees Rs.

Seal & Signature of Center Co-ordinator

Date:

Name of the Candidate

Application form No.

Programme Applied for

Application  Accepted /  Rejected /  Pending

For IIBM

Date:

Course Co-ordinator

**INDIANA INSTITUTE OF BUSINESS MANAGEMENT  
ACKNOWLEDGMENT CARD**

Dear Student,  
Thank you for joining IIBM Programme. We acknowledge the receipt of your application form. Please mention Registration Number and course applied for in all your future correspondence with the Institute.

Name of the Student : \_\_\_\_\_

Course Applied for : .....

DD/ Cheque No. : .....

DD/ Cheque Date : .....

Amount : .....

DD Drawn on : .....

.....

Your Registration Number is

**For Office Use Only**

Seal & Signature of Receiving Authority