



Application Registration No. :

GRD INSTITUTE OF MANAGEMENT
Dr. G.R. DAMODARAN COLLEGE OF SCIENCE

(Autonomous, affiliated to the Bharathiar University and approved by the AICTE)

Accredited at the **FIVE STAR** level by the **NAAC** and **ISO 9001:2000** Certified

CIVIL AERODROME POST □ AVANASHI ROAD □ COIMBATORE - 641 014

APPLICATION FOR ADMISSION TO THE
POST GRADUATE PROGRAMME IN MANAGEMENT – MBA (PT)

Affix recent
Passport Size
Photo here

Please provide all the information asked for ;
clearly indicate 'not applicable' wherever necessary.

1. Name (in BLOCK LETTERS)
(as in Records)

2. (a) Mailing address for
further communication

(b) Father's / Guardian's
name and address

Tel. No. PIN

Mobile :

E-mail :

Tel No. PIN

Mobile :

E-mail :

3. SEX : Date of Birth : (As in SSLC Book)

Blood Group :
Date Month Year

4. If you belong to any of the communities notified by the Tamil Nadu Government as Scheduled Caste / Scheduled Tribe or Backward Community, please tick the appropriate box below. You should enclose a certificate in support of the above information, signed by a Gazetted Officer of the Tamil Nadu Government or an Officer of the Revenue Department not lower in rank than a Deputy Tahsildar or a Judicial Magistrate.

Denotified Community

Most Backward Community

Scheduled Caste

Scheduled Tribe

Backward Community

5. (a) Provide the following information pertaining to your Higher Secondary and College education :

	Name of the Degree Certificate	Name of the University or Board of Examination	Year of completion/ graduation	Aggregate marks obtained	Aggregate maximum marks	Class and percentage of marks*
H.S.C. / Pre-degree						
Bachelor's Degree						
Post-graduate Degree						

* For Bachelor's Degree, indicate the Class and Percentage of marks secured in Part-III subjects only.

6. Name of the Educational Institution and medium of instruction :

	Name of the Institution	Medium of instruction
Higher Secondary School
College

7. Employment Information :

(Start with the present employment. Use additional sheets if necessary)

8. Provide any other information (such as job description / responsibilities, areas of expertise, distinguished participation in extra-curricular activities, notable contribution made during work experience, or the reasons for your desire to pursue a management programme) which will help to assess your suitability for the programme. (Use additional sheets if necessary).

9. Application Fee : The Demand Draft for Rs. 400/- should be drawn in favour of The Principal, Dr. G.R. Damodaran College of Science payable at Coimbatore and sent to The Principal, Dr. G.R. Damodaran College of Science, Coimbatore - 641 014. Please enclose stamped self-addressed post card to receive your acknowledgement and Application Registration Number.

DECLARATION

I hereby apply for admission to the Master of Business Administration (Part-Time) Programme and I declare that all the information given by me in the application form is true and complete and I agree that the offer of admission if made may be revoked in the event of the above information being found to be incorrect. I also agree to abide by the rules and regulations of the College and the Bharathiar University governing the M.B.A. (Part-Time) Programme prevailing at the time of applying for the programme and also to the subsequent amendments that may be introduced from time to time. I also agree to withdraw from the College, after admission in the event of the Bharathiar University revoking my admission. I also agree and undertake not to claim any refund of any fee / deposits in the event of my withdrawing from the College / revoking of my admission.

Station :

Date :

Signature of the applicant

To be filled by the admitting officer (and not by the Candidate)

Date of admission

Roll No.

Admitted in

Signature of the Admitting Officer