



Berchmans

INSTITUTE OF MANAGEMENT STUDIES

St. Berchmans College **Autonomous**

Changanacherry, Kerala

S B College Established in 1922 | Reaccredited by NAAC with A grade |

Academic Autonomy conferred by UGC in 2014.

☎ 91- 481-2411471, 9544200071, 9961399619

✉ mail@smba.in

Reg. No:

Adm. No:

Class No.

APPLICATION FOR ADMISSION TO THE MBA COURSE

(Read instructions carefully before filling in this application.
Any false information will lead to cancellation of Admission)

AFFIX YOUR RECENT
PASSPORT SIZE
PHOTOGRAPH HERE
(mandatory)

Please mention your preference for admission

Govt. Aided

Self Financing

Both

(To be filled in Block letters only)

APPLICANT'S PERSONAL DETAILS

Name:

(as it appears in your latest mark list)

Date of Birth :

dd mm yy

Gender: Male

Female

Marital Status: Single

Married

Nationality

Domicile State

Category: General

SC

ST

OEC

OBC

Religion

Community/Caste

RCSC

Diocese

Parish

Are you physically challenged: yes

no

Whether seeking admission under management quota? :yes

no

CONTACT DETAILS

PERMANENT ADDRESS

.....

.....

.....

District.....

State.....

PIN.....

Tel.....

Mob.....

E-mail id of Candidate:.....

PRESENT ADDRESS

.....

.....

.....

District.....

State.....

PIN.....

Tel.....

Mob.....

PARENT INFORMATION

Fathers Name:.....
 Education:.....
 Occupation:.....
 Income per Annum:.....
 E-Mail:.....
 Mob:.....

Mothers Name:.....
 Education:.....
 Occupation:.....
 Income per Annum:.....
 E-Mail:.....
 Mob:.....

EDUCATIONAL INFORMATION

SL NO	Qualification	Name of Institute	University/Board	State	Year of Passing	Month of Passing	No of attempts	Reg no	Marks obtained	Maximum marks	Percentage
1	Class 10										
2	Class 12										

GRADUATION

Course	Name of Institute	University/Board	State	Year of Passing	Month of Passing	Reg No

Statement of Degree Marks

Semester	Marks/ CGPA Secured	Maximum Mark /Grade Point
S1		
S2		
S3		
S4		
S5		
S6		
S7		
S8		
Total		

POST GRADUATION

Course	Name of Institute	University/Board	State	Year of Passing	Month of Passing	Reg No

Statement of PG Marks

Semester	Marks/ CGPA Secured	Maximum Mark /Grade Point
S1		
S2		
S3		
S4		
S5		
S6		
Total		

EXAM DETAILS

Qualifying Exam	Score	Overall Percentile	Reg No	Month and Year	Remarks
CAT					
MAT					
CMAT					
KMAT(Kerala)					

CURRICULAR & CO-CURRICULAR ACTIVITIES

Literary Activities	
Social/Cultural Activities	
Sports & Games	
NCC, NSS, ISEE	

ACADEMIC ACHIEVEMENTS

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WORK EXPERIENCE

Name of Organization	Address	Designation	Date of Joining	Date of Leaving	Remarks

ADDITIONAL QUALIFICATION

Training/Certification	Name of Institution	Authority issuing the certificate	Total Duration	Month & Year of passing	Percentage of marks

DECLARATION

I hereby undertake that , if I am admitted to this college, I shall abide by the rules and regulations without violating the orderly working, discipline and reputation of the college.

I do affirm that the information furnished in this application is true to the best of my knowledge and belief.

Place:

Date:

Signature of Parent/Guardian

Signature of the Candidate

FOR OFFICE USE ONLY

The Applicant May be Admitted to the First Semester.....Programme

	Weightage	Total	Rank
Aptitude Test			
GD			
Interview			

Date:

Head of the Department

Director

Principal