

Last Date for Submitting Application (along with DD of Rs. 1500/- in favour of “Convener, PIM-MAT 2019” payable at Jaipur): 27th July, 2019

Roll No.
(To be allotted by the Institute)

**UNIVERSITY R.A. PODAR INSTITUTE OF MANAGEMENT
FACULTY OF MANAGEMENT STUDIES
UNIVERSITY OF RAJASTHAN, JAIPUR
MBA(Executive) Admission Application Form 2019**

For Office Use
Application Received
on

Tick the Category Applicable							
Gen.	SC	ST	OBC	SBC	PH <small>(Physically Handicapped)</small>	Ex- Serviceman	KM
1	2	3	4	5	6	7	8

Recent Passport
Size Photograph

Bachelor's Degree									%
B.A.	B.Com.	B.Sc.	B.E.	B.B.M.	BCA	BBA	PG	Any Other	

Name of Candidate (Leave one square blank after each word)

Mailing Address (DO NOT REPEAT THE NAME)

E-Mail ID																			
Telephone No.																			

Date of Birth				Nationality				Sex	
								Male	Female
								<input type="checkbox"/>	<input type="checkbox"/>

Father's Name

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Payment Details

DD No. & Date

Bank Name

I declare that the information given by me in this application is true and complete to the best of my knowledge. I understand that the suppression of fact or false information may lead to cancellation of this application. If admitted, I agree to abide by the rules and regulations of the University.

Place

Date

Full Signature of Applicant

Note: Please attach photocopy of eligibility documents with this application form. Original documents are required at the time of Group Discussion and Personal Interview.

DECLARATION BY THE CANDIDATE

Works Experience (History)

S.No.	Name of Organisation	Joined	Left on	Designation	Salary	Duration (Year & Month)
1.						
2.						
3.						
4.						
5.						

I declare that all the information given above is correct and I fully understand that my admission will stand cancelled if it is found that any information supplied by me in the application form or in this certificate is false and / or incomplete. I have gone through the prospectus carefully and have understood the relevant rules.

Place: Jaipur

Date: _____

(_____)
Signature of the Candidate

For Office Use only

The information has been verified with originals and found correct.

Authorised Signatories

SERVICE CERTIFICATE

Name _____ Roll No. _____

1. Name of the Employee _____: Category : SC/ST/OBC/SBC/GEN
2. Name of the Organization/Department presently employed with :

3. Designation of the Employee(Candidate)_____
4. Office Address _____

5. Residential Address _____

Telephone: Office _____ Residence _____
6. Date of joining the present Organization/ Deptt. _____
7. Duration of service (as on or Before 01st July 2019): Years ___ Month ___ Days ___
8. Number of persons working under the supervision of the employee _____
9. PAN No. _____ Last Salary Drawn: Rs. _____

(Name & Address of the Employer/
Authorized Signatory)

Place: Jaipur

Dated: _____

Official Seal _____

The employer/ authorized signatory must sign and affix seal only after verifying all the facts and satisfying himself/ herself totally. The candidate should bring form 16 of last financial year and/ or last month pay slip as a proof of income. Submission of any false information will result in cancellation of admission.

Please Note: Bring this certificate duly filled along with originals at the time of GD and PI. Please note that without this duly filled in certificate you will not be allowed in participate in GD/PI.