Application Form

UNIVERSITY COLLEGE OF BUSINESS STUDIES
UNIVERSITY OF CALCUTTA

Sl. No………..

Session………

Form sold
by………

Alipore Campus. 1, Reformatory Street
Calcutta-700027

Affix here one
passport size
Photograph
(duly attested)

Form of Application for Admission to MHROM Course, 20

Selection No.-------------------------- Roll No.-----------------

A. 1. 1. (a) Full Name…………………………………… (b) M/F………………….
       (in block letters)   (Surname)   (First name)
    (c) Nationality…………………………. (d) SC/ST/PH……………………………
    (e) Date of Birth……………………….. …………….
  2. (a) Father's/Guardian's Name………………………………………………….
    (b) Occupation……………………………………………………………..
    (c) Office Address…………………………………………………………….
    …………………. (f) Tel. No./Fax………………………………..
  3.   Mailing Address…………………………………………………………..
    ………………………... PIN…………………….. Tel. No…………………
  4.   Permanent Address………………………………………………………..
    …………………………PIN……………………. Tel. No…………………

B.   1) University Registration No…………………….….of ……………………
       (if already a student of Calcutta University)

    2) **CAT /MAT /or any other national level admission test Score:**

3. *Academic Qualification:

Sl. No.	Year (in descending chronology)	Degree	Institution	Board/University	Major Subjects Combination	(Aggregate Marks obtd.) (Total Marks)

*Photocopies of duly attested relevant supporting documents are to be submitted along with the Application Form and the originals of the documents are to be produced at the time of submission to **Department of Business Management, University of Calcutta, Alipore Campus (6th Floor), Kolkata – 700 027**

3. Name of Bank…………………………….. DD No. ………………… dt………
   Amount Rs…………………………

…………………………
Attested (with seal)

D. Declaration :
    1. By Applicant:
        If any of the above statements are found to be incorrect, or if it is found that I have in any way contravened the provisions of the rules and regulations relating to eligibility for prosecuting studies at the Post-Graduate Class or relating to eligibility for taking the University Examination after such studies, my admission will be liable to be cancelled and I shall not be entitled to refund of fees paid by me. Also, I bind myself to abide by the code of conduct and discipline as may be enforced by the authorities from time to time.

Signature(in full)………………………………   Date…………………………..

    2.By Father/Guardian ;
        I certify that the above statements are true.

Signature(in Full)……………………………….   Date…………………………