



JAI BHARATH SCHOOL OF MANAGEMENT STUDIES

(Approved by AICTE, Affiliated to M.G University and ISO Certified)

Arackapady, Vengola P.O, Perumbavoor, Kochi - 683 556

Phone : 0484 - 3250474, 2656844 Fax : 0484 - 2655001

Website : www.jaibharathcollege.com E-mail : info@jaibharathcollege.com

INSTRUCTIONS FOR FILLING THE APPLICATION FORM

Note: (Please read the academic hand book carefully before filling up the application form. Please do not send back the insruction sheet or academic hand book with the filled in application)

1. Name of the Applicant: Write your name in CAPITAL letters as given in the records of the Secondary School.
2. Name of Parent/Guardian : Please give the name of father or mother. Guardian's name to be given only if parents are not alive. Please also write income of your parent/guardian.
3. Address : Complete postal address with name of District and Pin code to be given.
4. Date of Birth : Write in the order of Date, Month and Year. If you were born on 9th April, 1986 write 09-04-1986.
5. Details of amount remitted towards the cost of application form; Attach original receipt obtained for payment of cost of application form.
6. Photograph : Affix your recent passport size photograph attested by signing over the photography by a Gazetted Officer or head of the Institution last attended or presently studying. The name and address of the attesting officer should be given in the space provided. Also bring two additional copies of photograph.
7. marks secured in qualifying examinations: The enclosed form for mark sheet in respect of candidates who have only appeared at the time of submission of application should be produced within 15 days of publication of results. Others should send the mark sheet along with the application itself.
8. Attach two self addressed envelopes of 10cm x 22cm size with postage stamp for Rs.5/-each. Also attach a self addressed Post Card for acknowledgment.
9. Completed application should be sent to the Director, Jai Bharath School of Management Studies, Arackappady, Vengola P.O., Perumbavoor, Kochi 683556. Candidates are advised to sent their application by Registered Post with acknowledgment due.
10. Wrongly addressed applications will be rejected.

Applications found incomplete and defective with respect to any of the items mentioned above will not be entertained.



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APPLICATION FOR ADMISSION TO MBA - 201

Note: Fill one character in a box. Mark to answer a query.

Application number

Register No. (CMAT / MAT)

FORM FOR MARK SHEETS

Please fill in the marks obtained in the qualifying examination in this form. Where the name of additional subject if any in the space provided and enter the marks. Candidates whose results have not been published at the the time of application should send this sheet immediately after the publication of results. Attested copies of all the mark lists should be attached.

Name of the course applied for **MBA**

1. Name of candidate (In block letters)

2. Name of the qualifying examination passed

A.Details of Admission Test (MAT / CMAT / CAT)

Name of the Test	Date of Test	Register No.	Marks obtained	Rank (If Any)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

B.Details of Graduation

Annual Stream : Name of the examination: University:

subjects	Register No. & Year of Passing	Marks Obtained	Max. Marks	Percentage of Marks
Part -I	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Part - I	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Part - III (Optional/Main)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Part - III Total	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Grand Total	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

C. Semester System - Exam. Score Table

Name of the examination	University/Board	Register No.& Year Of Passing	Marks Obtained	Max. Obtained	Percentage of Marks
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Semester	Credit	GPA	Grade Awarded
S1	<input type="text"/>	<input type="text"/>	<input type="text"/>
S2	<input type="text"/>	<input type="text"/>	<input type="text"/>
S3	<input type="text"/>	<input type="text"/>	<input type="text"/>
S4	<input type="text"/>	<input type="text"/>	<input type="text"/>
S5	<input type="text"/>	<input type="text"/>	<input type="text"/>
S6	<input type="text"/>	<input type="text"/>	<input type="text"/>
CGPA	<input type="text"/>	<input type="text"/>	<input type="text"/>

DECLARATION

I hereby solemnly and sincerely affirm that the statements and information furnished above and in the enclosure submitted by me are true. I also solemnly affirm that I have read the academic hand book and I am agreeable to the conditions stated therein. If any of the information furnished therein is later found to be untrue in material particulars or in any other manner, I am aware that I am liable to criminal prosecution and I also agree to forgo my seat in such a case.

Signature of Parent/Guardian

Signature of the applicant :

Place:

Date :

