



JAI BHARATH SCHOOL OF MANAGEMENT STUDIES

ISO 9001-2000 Certified, Approved by AICTE and Affiliated to M.G. University
Arackapady, Vengola P.O, Perumbavoor , Kochi - 683 554,
Phone : 0484 - 3250474, 2655379 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 instruction 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. E.g. 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 photograph 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 683 554. Candidates are advised to send 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/MHRM - 200

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

Application number

Register No. (MAT)

FORM FOR MARK SHEETS

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

1. Name of candidate (In block letters)

2. Name of the qualifying examination passed

1. Name of the course applied for

MBA

MHRM

A. Details of Admission Test (MAT/ASMIK-MAT)

Name of the Test	Date of Test	Register No.	Marks obtained	Rank (If Any)

B. Details of Graduation

a) Annual Stream

Name of the examination :

University :

subjects	Register No. & Year Of Passing	Marks Obtained	Max. Marks	Percentage of Marks
Part - I				
Part - II				
Part - III(Optional/Main)				
Part - III Total				
Grand Total				

C. Semester System

Name of the examination	University/Board	Register No. & Year Of Passing	Marks Obtained	Max. Marks	Percentage of Marks

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



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APPLICATION FOR ADMISSION TO MBA/MHRM - 200

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

Application number

Register No. (MAT)

Note: Please read the instructions carefully before filling the application form. No column should be left blank. Application with insufficient details is likely to be rejected.

Please affix
passport size
photograph attested
by a
Gazetted Officer

Name of the course applied for

MBA

MHRM

1. (a) Name of candidate (In block letters)

(b) Address to which communication are to be sent

i) Door No./House Name

ii) Area/Street/Road

iii) Post office

iv) District & State

v) Phone No. with area code

vi) Mobile No.

PIN

E-mail

(c) Permanent address of the candidate if different from above

i) Door No./House Name

ii) Area/Street/Road

iii) Post office

iv) District & State

v) Phone No. with area code

vi) Mobile No.

PIN

E-mail

(d) Nationality Indian

Other

(e) Gender Male

Female

(f) Religion

(g) Caste

(h) Blood Group

2. Date of Birth in Christian era

D D M M Y Y Y Y

3. Details of extra curricular activities
Sports / Fine Arts etc.

4. Achievements attained

5. Details of scholarships/award obtained

6. (a) Name of Parent/Guardian

(b) Address of Parent/Guardian

Contact No. (Tel/Mob)

e-mail address if any

(c) Occupation of Parent/Guardian

(d) Annual income of Parent/Guardian

7. Are you native of Kerala Yes No

8. (a) Name of qualifying examination
(BA / B.Sc / B.Com / B.Tech etc.)

Appeared/Passed

(b) Name of University or Board

(c) Register No. / Month / Year

(d) Name of Institution in which studied

(e) Number of chances availed for the qualifying examination

9. Are you employed? Details of employment?

10. Any other feature for special consideration?

Yes No

11. Reservation Particulars

Are you eligible for reservation under any category (Yes/No)

If Yes, Specify Community/Category:

(Management Quota/SEBC/SC/ST/ any Other(Specify)):

12. Details Of Application Fee remitted:

a) Receipt No& Date (If paid in cash) :

b) DD Particulars (If payment mode is DD)

DDNo: dt.....Amount:.....

Name Of the Bank:.....Branch:.....

Please enclose copies of relevant certificates and documents duly listing them below.

- Original receipt for payment of Rs.350/- or DD
- 2 self addressed stamped (Rs 5/- each) envelopes.

Attested copies of

- Certificate of Qualifying Examination
- Mark sheets
- Certificate for the proof of Date of Birth
- Course Certificate
- Copy of the Score Card for admission MAT/ASMIK-MAT test
- Other (please specify)

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

For office use only