

Form No.:	
ACADEMIC YEAR :	
COURSE:	

Maratha Mandir's

BABASAHEB GAWDE INSTITUTE OF MANAGEMENT STUDIES

1st Floor, Babasaheb Gawde Chowk, Dr. A.B. Nair Road, Mumbai Central, Mumbai – 400 008.

ADMISSION FORM Instructions

- (1) Only one form shall be submitted by a candidate.
- (2) Form should be filled in CAPITAL letters only.
- (3) In case of overwriting, the form may be rejected.
- (4) Please fill in the application form completely and correctly.
- (5) Please $\sqrt{\text{appropriate box}}$, wherever provided.
- (6) Please submit the application to the competent admission authority on or before the last date of submission.

(7) Submit FIVE recent passport size photographs

Affix Passport Size Recent colour **Photograph**

1	CANDID	ATE'S	GENERAL	INFORM	1ΔΤΙΩΝ:
	. CANDID	AILO	TUITUITAL	7 11 11 () 1X 1Y	

	Surna	ame		First N	Vame	:	Father's N	Jame		Mother's	s Name
1. Name :											
	(Note: Name s	should be	exactly a	as menti	oned in S	S.C. certi	ficate)				
2. Gender	: Male	Female	Tra	ansgend	er						
3. Date of Bir	th : [DD			MM			YY	YY		
4. Marital Sta	tus :	Single		Ma	rried		ivorcee				
5. Nationality	/:				6. Re	eligion: _					
7. Caste of car	ndidate:				8. St	b-Caste, i	f any: _				
9. If Reserved (Tick the a	d Category : ppropriate Col	umn)	SC	ST	NT-B	NT-C	NT-D	VJ	SBC	OBC	Open
10. Domicile:					11. N	Nother ton	gue:				
12. Permanen	t Address:										
City / V	ïllage :					Stat	e :				
						Pi	n :				
Telepho	ne Number :			STE	Code		_				

(Specify if Govt. employee): _		Gross Annual 1	Income:
Telephone :	Mobile:	Email:	
Name & address of Office :			
Education :			
(Please indicate if deceased / re	etired / divorcee)		
1. Father's Name :			
2. FAMILY INFORMATION:			
23. Any other Information you wo	uld like to add:		
22. You have heard of this institute			
21. Ration Card Number (Attach X			
19. Driving License No.:		_	
17. Election Identification Card No.	0.:	18. Aadhar No	
Maratha Mandir M			
Farmer's Son / Dau Maratha Mandir Er			
Ex – Servicemen's			
Teacher's Son / Da			
Physically Handica Freedom Fighter's			
16. ✓ All that applicable			
10			
15. Email:	Mobile Numb	er:	
Telephone Number:	STD Code	- 🗆	
		Pin:	
		D:	
City / Village :		State :	
(for Correspondence & Railway Concession)			
14. Local Address :			
Telephone Number:	STD Code		
		Pin:	
City / Village :		State :	
13. Native Place Address:			

(Please indicate if	deceased / retired / divorcee)						
Education :		Occupat	Occupation :				
Name & address of	Name & address of Office :						
Telephone :	Mobile:		Email:				
(Specify if Govt. employee):			Gross A	nnual Income:			
Spouse's Name:							
(Please indicate if	deceased / retired / divorcee)						
Education :		Occupat	ion <u>:</u>	Age:			
Name & address of	of Office :						
Telephone :	Mobile:		Email:				
	employee):						
(Specify if Govt. 6							
(Specify if Govt. 6	employee):						
(Specify if Govt. 6) Name of Brother	s & Sister/s if any :		Gross Ar	nnual Income:			
(Specify if Govt. 6) Name of Brother	s & Sister/s if any : Name		Gross Ar	nnual Income:			
(Specify if Govt. 6) Name of Brother/ Relation	s & Sister/s if any : Name 1.		Gross Ar	nnual Income:			
(Specify if Govt. 6) Name of Brother/ Relation	s & Sister/s if any : Name 1. 2.		Gross Ar	nnual Income:			
(Specify if Govt. 6) Name of Brother/ Relation	s & Sister/s if any : Name 1. 2. 3.		Gross Ar	nnual Income:			
Name of Brother Relation Brother	s & Sister/s if any : Name 1. 2. 3.		Gross Ar	nnual Income:			
Name of Brother/ Relation Brother Sister	Name	Age	Occupation	nnual Income:			
Name of Brother Relation Brother Sister	Name 1. 2. 3. 1. 2. 3. IFORMATION: (Only if candidate)	Age de la contraction de la co	Occupation With parent)	nnual Income:			
Relation Brother Sister GUARDIAN'S IN Jame of the Local	Name	Age de la contraction de la co	Occupation With parent)	Annual Gross Income			
Name of Brother Relation Brother Sister GUARDIAN'S IN Name of the Local Relationship with the	s & Sister/s if any : Name 1. 2. 3. 1. 2. 3. WFORMATION: (Only if candidate guardian:	Age te not staying v	Occupation With parent) ducation:	Annual Gross Income			

4. CANDIDATE'S ACADEMIC INFORMATION: (Note: Starting from SSC)

	Exam Passed	Name of the Institute	Board/ University	%
	S.S.C.			
5. EXP	ECTED SPECIALISATION	ON: (Tick Any One):		
	Iarketing Finance	∏HR		
	_	_		
Wed	offer only above mentioned	specialisations.		
6. BAN	K ACCOUNT FOR E-TE	RANSFER: (for repayment like de	eposit etc., if any)	
		RANSFER: (for repayment like de	•	
i) N	ame of the Account Holder	r:		
i) N	ame of the Account Holder	* - *		
i) N ii) N	ame of the Account Holder Vame of the Bank & Branch	r:		
i) N ii) N iii) E	ame of the Account Holder Vame of the Bank & Branch	r: iii) IFSC		
i) N ii) N iii) E (A	ame of the Account Holder Name of the Bank & Branch Bank A/c No.:	r: iii) IFSC		
i) Nii) Niii) B(A7. REF	ame of the Account Holder Name of the Bank & Branch Bank A/c No.:	r: iii) IFSC		
i) Nii) Niii) B(A7. REF	ame of the Account Holder Name of the Bank & Branch Bank A/c No.:	r: iii) IFSC		
 i) N ii) N iii) E (A 7. REF Give ' 	ame of the Account Holder Name of the Bank & Branch Bank A/c No.: Littach Photocopy of cancell ERENCES: Two (2) references (Not in	r: iii) IFSC	2 No :	
i) N ii) N iii) E (A 7. REF Give '	ame of the Account Holder Name of the Bank & Branch Bank A/c No.:	r: iii) IFSC ded Cheque) Relation)	C No :	
i) N ii) N iii) E (A 7. REF Give '	ame of the Account Holder Name of the Bank & Branch Bank A/c No.:	r: iii) IFSC	C No :	
i) N ii) N iii) E (A 7. REF Give '	ame of the Account Holder Name of the Bank & Branch Bank A/c No.:	r: iii) IFSC	C No :	
i) N ii) N iii) E (A 7. REF) Give a. Nam Addi	ame of the Account Holder Jame of the Bank & Branch Bank A/c No.:	r: iii) IFSC	Telephone No.:	

_____ Telephone No.: _____

8. DECLARATION BY THE CANDIDATE AND THE PARENT / GUARDIAN:

- 1. The information furnished by me / my ward in this application is true to the best of my / our knowledge and belief.
- 2. I / we declare that I / my ward shall abide by all rules and Code of Conduct of the institute which I / we have read and understood. Specially I / we declare that the rule of attire that the male students should not wear lehenga, zabba and / or any kind of cap and female students should not wear burqa any time in the institutional campus will be strictly followed by me / my ward. I / we also declare that I / my ward will abide by instructions, rules etc. of the competent authority (University of Mumbai, DTE and / or other authorities) and also Laws in force from time to time.
- 3. I / we hereby undertake that I / my ward shall pursue the studies and shall not do anything inside or outside the institute, which may result in disciplinary action against me / my ward.
- 4. I / we hereby solemnly declare that I / my ward have read all the Rules of admission to the Institute and after fully understanding the same, I / we have filled in this application.
- 5. I / we declare that I / my ward have not been debarred from studying in any school or college or appearing in any examination during the period of my / my ward's studies.
- 6. I/we fully understand that no other document than those required will be entertained for priority for admission.
- 7. I / we fully understand that the Principal / Director, of the institute or the competent authority will have full liberty to expel me from the institute for any infringement of the rules of conduct and discipline and the undertaking given above. So also if I / my ward practice /s any unfair means during examination.
- 8. I / we understand that if the admission being given to me / my ward is on my / my ward's claim of reservation, the same shall be provisional and the same will be cancelled if the said claim is rejected by any Competent Authority / Director of Social Welfare Maharashtra State, Pune or found to be false. Creamy Layer certificate, if applicable, shall be produced within seven days of admission.
- 9. I/we accept that the fees levied for MMS are interim fees approved by Shikshan Shulka Samiti (S.S.S.) and are ready to pay the difference in fees finally approved by the S.S.S.
- 10. I / we fully understand that fees once paid will not be refunded.
- 11. I/we hereby undertake to pay fee for the entire course if I/my ward leave/s the course midstream.
- 12. I / we fully understand that the admission to the course will be made depending on my / my ward's inter-se-merit and availability of a seat at the time of scrutiny of my / my ward's application when I / my ward is called for a seat.
- 13. I / we undertake to bind myself / ourselves to pay within due date such fees, charges and the dues as levied by authorities from time to time.
- 14. I/my ward hereby agree to observe rules relating to library, IT Centre, I-card, Dress Code and Code of Conduct.
- 15. I / we shall take care that I / my ward behave/s properly and do / does nothing except in the interest of studies.
- 16. I/my ward am/is aware that the institute organizes guest lectures, industrial visits and other activities for students. I/my ward undertake to participate in such events organised by the institute. I/my ward undertake to abide by instructions given by the faculty in-charges of the activity and I / my ward will not hold the institute responsible for any kind of accident/untoward incident that may cause any harm/injury/loss to me/my ward.
- 17. I / we undertake to notify any change in the above given information to the institute within 7 days of such change in writing.

- 18. I/my ward am/is fully aware that all disputes will be subject to Mumbai Jurisdiction.
- 19. I/we accept that I/we will have to strictly abide by the dress code as prescribed by the institute while on the premises of the institute and/or representing the institute outside.
- 20. I/we understand and accept that I/we will not be entitled to any sort of scholarship/freeship, if the same is not granted by the concerned Authorities including scholarship/freeship awarded to SC/ST/DT/NT/OBC/SBC candidates by Social Welfare Department of Government of Maharashtra.
- 21. I /we understand & agree that the deposit will be refunded at the time of leaving institute after completion of programme successfully after deducting Alumni Association fee, common breakage & other dues etc.
- 22. I will not indulge in any behaviour or act that may be constituted as ragging & will not participate in or abet or propagate through any act of commission or omission that may be constituted as ragging under clause 3 of AICTE regulations.
- 23. I/we am/are fully aware of the panel or administrative action that is liable to be taken against me in case I am found guilty of or abetting ragging actively or passively or being part of a conspiracy to promote ragging.

Note: No candidate will be admitted to any Semester / Year Examination unless he keeps terms for that Semester / Year at an Institute and unless he is certified by the Principal / Director that he has:

- a) Put in satisfactory minimum attendance of 75% of total period as prescribed in the syllabus, separately in each and every subject of semester / year.
- b) Satisfactorily completed the specified projects, assignment, practical etc. prescribed in the syllabus / given by the faculty for the semester / year.
- c) Satisfactory progress in his studies and is of good conduct and character.
- d) Not been debarred from appearing for examination, by any government, competent authority or statutory examining authority in India.
- e) Ragging is strictly prohibited.
- f) Chewing Tobacco / Smoking Cigarette in institute premises is Prohibited

Signature of Candidate:	Parent's / Guardian's/Spouse Signature:
Date :	Name of the Parent /Guardian/Spouse:
Place ·	Relation with the candidate:

DOCUMENT REQUIREMENT AND SCRUTINY FORM

(For Fresh admission only)

Sr.	Particulars		inal Cert ropriate (Remark for Scrutiny
No.	Tar tections	Yes	No	NA	Scruting
1.	Allotment letter or printout from website				
2.	CET/CMAT/CAT/JMET/MAT/ATMA/XAT/AMMI Final Score Card				
3.	SSC Marksheet & Certificate				
4.	HSC Mark sheet & Certificate				
5.	Graduation Marksheet (all years for other than Mumbai University)				
6.	Graduation Certificate				
7.	Transfer Certificate from previous college				
8.	School/College Leaving Certificate				
9.	Indian Nationality Certificate				
10.	Provisional Eligibility Certificate				
11.	Migration Certificate				
12.	Domicile certificate				
13.	Caste Certificate				
14.	Non-Creamy Layer Certificate				
15.	Caste Validity Certificate				
16.	Proof of Date of Birth				
17.	Undertaking for Anti Ragging				
18.	Aadhaar Card				
	Scrutinized by: Signature of	of Studen	t:		
	Recommended for Admission	Fee	es (Rs.) :		
	Authorized Signatory				

MEDICAL FITNESS CERTIFICATE

(By registered Medical practitioner)

I have thoroughly examined Shri./Ku	today
the day of 20	and certify that he/she has sound constitution, no disease, no
serious defect in eye sight, no physical disability and no	mental infirmity. I further certify that he/she is fit to undergo
-	ng that can make him/her unfit to undergo manual work in any
outdoor activity.	
Weight:Kgs.	Blood Group:
Date :	Height: cms.
	Signature:
Address:	Name:
	- Qualification:
	Registration No.:
SEAL	
	Form No.:
Received the admission form from Mr./Ms.	
For Year of Admission m Inter-se-merit and as per rules prescribed by the authorities	ay be confirmed only after due scrutiny, availability of seat,
Described and the second second	ъ.
Receiver's Signature:	Date:

(Note: This is only acknowledgement of receipt of admission form & does not confirm the admission.

Name:	
1.	What are your hobbies?
2.	Have you received any formal training in any of the following? (Please √) ☐ Musical Instrument ☐ Singing ☐ Dance ☐ Fine Arts ☐ Comparing ☐ Any other (please mention)
3.	Have you any time worked with any NGO/ voluntary organisation? Yes ☐ No ☐ If Yes, Give details:
4.	Have you participated in extracurricular activities in your school / college? Yes \square No \square If Yes, Give details:
5.	Have you participated in any committees in your school/college? Yes □ No □ If Yes, Give details:
6.	Have you participated in any interschool/collegiate event/s? Yes ☐ No ☐ If Yes, Give details:
7.	Any Other Information you feel necessary:
	Date: Signature: