

**Sub Category:**.....

## Mailing Address

(A) Permanent Address	<input type="text"/>	<input type="text"/>
Correspondence Address	<input type="text"/>	<input type="text"/>
State & Pin	<input type="text"/>	<input type="text"/>
(B) Father's Name	<input type="text"/>	<input type="text"/>
Occupation	<input type="text"/>	
Office Address	<input type="text"/>	
Tel/mobile No.	<input type="text"/>	
(C) Mother's Name	<input type="text"/>	<input type="text"/>
Occupation	<input type="text"/>	
Office Address	<input type="text"/>	
Tel/mobile No.	<input type="text"/>	
Annual Income	₹ <input type="text"/>	

## Academic Qualifications:-

Qualification	Name of the Institution/ School with address	Name of the Board/University	Year of Completion	Marks Obtained in (%) or CGPA	Stream- Engg./Sc/ Commerce Arts/ etc.	Clear pass Supplementary result awaited
Secondary (10 <sup>th</sup> )						
Sr. Secondary (12 <sup>th</sup> )						
Graduation Degree						
Post-Graduation Degree						
Other Degree/Diploma (if any)						

\* Marksheet of the qualifying exam must be submitted till 31<sup>st</sup> August for IAMR UG courses & 30<sup>th</sup> September for IAMR PG Courses.

\* The Candidate whose results are yet to be declared should produce statement of marks immediately on declaration of his/her results.

**Please fill your gap year details (year wise) with affidavit**

**Do you require Hostel accommodation?**

Yes ☐

No ☐

**Do you require Transport Facility?**

Yes ☐

No ☐

**Entrance exams Details:**

Examination	Date	Reg./ Roll No	Composite Score	Percentile
UPTU				
CMAT/ MAT/ CAT				
OTHERS				

**Work Experience (if Any)**

Teacher's/ Principal's. name	Phone No. of Previous School/College	School Address

**Academic / Professional Awards/Medals/Prizes/Scholarship/Certificates/Honours, etc. ( Excluding those for extra-curricular Activities**

Name of the Award	Awarding Institution	Level (State/National)	Basis of Award	Year

**Mandatory details to be filled by Students:**

**Enclosures Check list- Tick (✓) with Details:**

- Marksheet of 10<sup>th</sup>, 10+2 & Graduation:  
☐ Roll no, of 10th ..... Serial no..... Passing year.....  
☐ Roll no, of 12th ..... Serial no..... Passing year.....  
☐ Roll no, of Graduation ..... Serial no..... Passing year.....
- If enrolled in CCS University/Other University for PG Courses, then mention the enrollment no .....
- Certificates:  
☐ Income: S.No. .... Certificate No. .... Issue date.....  
☐ Caste: S.No. .... Certificate No. .... Issue date.....  
☐ Domicile: S.No. .... Certificate No. .... Issue date.....  
☐ Migration/TC: S.No. .... Certificate No. .... Issue date.....
- For ID Proof (any one):  
☐ Aadhar Card No..... ☐ Voter ID Card No. ....  
☐ Driving License No..... ☐ Others.....
- Affidavit for Anti-Ragging by Student & Parents (Format to be taken from department).

**Counselled by:**

**Name:** .....

## Here by Undertake and Say on Oath that

- My Above name and address is true and correct.
- I have gone Through the rules and regulations of IAMR and agree to follow the same.
- I have clearly noted that the academic fees once deposited by me shall not be refunded/adjusted in any case, and I neither shall claim any refund nor I Shall approach any authority/court for refund.
- If I leave the Course/Programme in middle before completion. I Shall be liable to play the total academic fee & other charges for the total duration of the course/programme.
- If my attendance will be below 75%, I Shall not be entitled to appear in examination and shall not challenge /approach/ appeal to any authority/court.
- I certify that all the information provided by me is correct to the best of my knowledge and belief. In case. any information is found incorrect at any time, the IAMR will have sole right to cancel my admission and forfeit my all deposits with IAMR
- I agree that all disputes are subject to Ghaziabad Court's jurisdiction only.
- I do agree that I shall not involve in ragging (in physical & mental) Otherwise I shall be fully responsible for the consequences.

I \_\_\_\_\_ certify that all entries made in the application form are true the best of my Knowledge and belief. I fully Understand that the offer of admission will be made to me depending on my interest, merit and availability of seats and verification of my original testimonials. I am willing to produce original certificates in support there of if asked to do so at any stage during the course. I agree to abide by decisions of Ideal Educational Society on all matter regarding this application form. I shall not pursue any other Full-Time Programme from any other Institution /University during the duration of my programme.

Signature of Parents /guardian

Signature of Applicant

Date:

Date:

Place:

Place:

### FOR OFFICE USE ONLY

#### Group Discussion / Personal Interview

ICC Name:.....City: ..... Code: .....

Result .....

Selected Rejected

☐

Selected Rejected

☐

Interviewer's Name: .....

Signature of interviewer

Admission No.: .....

Date of Admission: .....

Fee Schedule.....

No of installments: .....

Signature of A/C Section