Form No.



ISO 9001-2000 Certified

(Approved by AICTE, Affiliated to MTU Noida (UPTU) and CCS University, Meerut, Recognised by UGC, Ministry of HRD, Govt. of India)

9th Mile Stone, Delhi-Meerut Road, Ghaziabad (Delhi-NCR) Ph: 0120-2675904/ 05, 9873280467, Email : info@iamrindia.com Admission Helpline : 09711209427, 09711209428, 07428360095

# **Application Form**

### **Instructions for Filling the Application Form:**

- 1. Fill up the application form in capital letters.
- 2. Form should be complete in all respects.
- 3. All original certificates are to be produced at the time of admission.
- 4. Paste your recent photograph in the space provided and sign across the photograph.
- 5. Incomplete application form will be rejected.

Paste

Self -attested Passport Size Photograph

To, The Director (A IAMR, Ghaziab		Progran	ogram Name						
APPLICANT'S I	PERSONAL DETAILS								
First Name									
Middle Name									
Last Name									
Date of Birth	D D M M Y Y Y	Y							
Mobile No.:		E-m	nail.:						
Please tick (√) w	whichever applicable								
Female	Male Single	Ma	rried						
Category									
Indian	NRI/Foreigners General		sc	ST	ОВС				

## **Mailing Address**

Permanent Address	]
City	
State	
Pin Code	
E-Mail	
Father's Name	
Occupation	
Office Address	
Tel/Mobile No.	
Mother's Name	
Occupation	
Office Address	
Tel/Mobile No.	7

### **Academic Qualification**

Qualification	Name of the Institution	Name of the Board/University	Year of Completion	Marks Obtained Aggregate (%)	Degree with Stream Engg./Sc/ Commerce/Art/etc.
Secondary (X)					
Sr. Secondary (XII)					
Graduation Degree					
Post-Graduation Degree					
Professional Degree					

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

Do you require Hostel accommodation?			Yes	No	Si	ngle Occupancy	,	Double	Occupancy
Do you require Trans	Yes	No							
Entrance Exams									
Examination	Examination Date		Reg./ Roll No.			Composite Score		Percentile	
AIEEE	AIEEE				Т				
UPTU									
CMAT									
MAT									
CAT									
XAT									
ATMA									
OTHERS									
Work Experience (if A	Any)							-	_
Name of Organization		Designation		F	Period from to Experience Year(s)			Emoluments per annum (in Rs. Lacs)	
Total Experience (in Year Academic/ Professional A	•				onour	s, etc. (Excluding	those	for extra-cu	rricular activities)
Name of the Award	Awarding Ins	stitution	Level (State/National)		)	Basis of Awards		Year	
					+				
Major Extra-Curricula	Major Extra-Curricular Activities/Hobbies								
Activity	Role		Level (State/National)		)	Year		Honors (if Any)	
					$\top$				
					$\top$				
	•		Decl	aration					
certify that all entries made in this application form are true to 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 for obtaining the eligibility. I am willing to produce original certificate in support there of if asked to do so at any stage during the course. I agree to abide by decisions of <b>IAMR Educational Society</b> on all matter regarding this application form. I shall not pursue of any other Full-Time programme from any other institution/University during the duration of my program.									
Place									 Signature
Date									Signature

# Answer these questions (Compulsory) a. What are your goals and objectives in life? b. What are your strengths & weaknesses? c. How do you think your qualities/strengths would help your batchmates during the course period? FOR OFFICE USE ONLY Enclosures Check List (Incomplete forms will be rejected) (a) Mark Sheet of 10+2 & Graduation. (e) SC/ST/OBC Certificate. (b) Proof of age (Matriculation Certificate). (f) Copy of Migration Certificate. (c) Character Certificate. (g) Copy of Visa and Passport (for NRI and Foreigners).

# (d) Domicile Certificate / TC. **Group Discussion/ Extempore** A) Body Language : ...../04 B) Flow of Language : ...../04 C) Ideas/Concepts : ...../04 D) Assertiveness : ...../04 E) Group Dynamics : ...../04 **Total** : ...../20 Moderator's Remarks: Moderator's Signature **Personal Interview** Student's Quality: Remarks: ICC Name: City: Code: Interviewer's Name: ..... Signature of Interviewer **Final Result** Rejected On hold Selected

Signature of Head - Admissions