

MANAGEMENT QUOTA APPLICATION FORM

Jagan Institute of Management Studies, Delhi

 admissions@jimsindia.org

Affix your recent
passport size
photograph here

NOTE:

- Please read the form carefully before filling it.
- Fill in the form in capital letters.

1. Name Mr. / Ms.

First and Second Name

Last Name

(The name should be as per the certificate of the last examination passed)

2. Email:

Mobile No:

3. Registration No CET/NIMCET/CUET

4. Course/Shift (s) applied for:

5. Detail of the Qualifying Examination (CET/NIMCET/CUET)

Roll No.

(a) CET

Rank

(b) NIMCET

Rank

(c) CUET

Score



6. Academic Qualifications

Examination	Stream	Year of completion	Name of the School/College	Board/University (Mention full Name)	% of Aggregate	% of Best of four subject
Sr. Secondary (10+2)						
Graduation						

7. How did you come to know about the institute and the program?

Friends/Family

Newspaper

Magazine

Other Sources

Website

8. Personal Detail:

(a) Date of Birth:

Date	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

(b) Age:

(c) Nationality:

(d) Blood Group:

(e) Any Permanent Disability

(f) Gender:

M	F	OTHERS
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(g) Languages known other than English

6. Detail of Parents:

Particulars	Father	Mother
Name		
Occupation/ Designation		
Name of the Organization & Address		
Office Tel No.		
Mobile No.		
Email id		

7. (a) Permanent Address

..... **Pin** **Tel No.**

(b) Address for Communication

..... **Pin** **Tel No.**

(c) Name and Address of Local Contact Person

..... **Pin** **Tel No.**

8. In case of emergency (Other than parents)

Name of the Contact Person	Address	Tel. No. (Res., Off.) & Mobile



SECTOR-5 ROHINI, DELHI

www.jimsindia.org

DECLARATION

Jagan Institute of Management Studies
Delhi-110 085

Sir,

I wish to apply for admission under management quota in Jagan Institute of Management Studies, Delhi and promise to abide by the Rules & Regulations of the Institute. I certify that the information given by me in this application form is correct and complete to the best of my knowledge and belief. I understand and agree that misrepresentation or omission of facts will justify the denial or cancellation of admission, or expulsion. I further declare that I shall submit myself to the disciplinary jurisdiction of the Principal of the Institute.

I have read and do hereby consent to abide by the terms and conditions of admission as mentioned in the prospectus.

Signature of the Candidate

Place.....

Date.....

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