

ATIONAL BUS ORTUNE I STITUTE OF I NT Э

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Entra	ince Exam De	<u>tails</u>		SL. N	lo.		
CAT MAT Other Attach an attested cop	Score Score			 P	assp	our rec oort siz ograph	ze
A. Personal Da . Full Name Mr. /N							
Date of Birth Current Address	DD MM		YY				
ty		PIN	Code				

4. Permanent Address					
City	PIN Code				
State					
5. Father's Name					
Father's Profession					
6. Mother's Name					
Mother's Profession					
Father's/Mother's Mobile					

B. ACADEMIC QUALIFICATION

S. No.	Degree/ Certificate	Board/ University	College Name	Specialization	Year of Passing	Percentage / Grade
1.	10th					
2.	10+2					
3.	10+2+3 Bachelor's Degree* (Specify)					
4.	Post Graduate** (Specify)					
5.	Any Other (Specify)					

* Select relevant one for Bachelor's Degree--B.A., B.Com. B. Pharma, B.E., B.Tech., B.Sc

** Select relevant one for post Graduate Degree-- M.A., M.Sc., M.Com., M.E. etc.

Note:

- a) OVERALL PERCENTAGE OF MARKS MUST INCLUDE ALL SUBJECTS.
- b) If you are awarded a grade point please convert them into percentage of marks and indicate.
- c) If there is a formula given by University for conversion it may please be stated.
- d) If you are a rank holder, indicate the same with class awarded.
- e) * If yet to be completed, please give us the details of your present status and percentage / grade scored till your last semester / year.



C. CORPORATE EXPOSURE

Work Experience (if any):

Name & Address of		Period			Last Salary	
Organization	Designation	From	То	Nature of Work	Drawn (Rs./ Month)	

TOTAL EXPERIENCE (IN YEARS)

D. AWARDS & HONOURS

Academic/ Professional Awards/ Medals/ Prizes/ Scholarship/ Certificate/ Honours, etc.

Year	Name of Award	Awarding Institution	Level (State / National/ International)	Remarks

E. MISCELLANEOUS

Major Extra-Curricular Activities:

Year	Activity	Role	Level	Remarks

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ADMISSION FORM

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Do you require hostel accommodation?	
submitted by me is correct and that I have n I understand that my admission may be can	hereby certify that the above information not provided any false or concealed any information. ncelled and amount paid by me forfeited, incase any time of admission is subsequently found to be
Signature of Parent/ Guardian Date: Place:	Signature of the Applicant
the application form. Please specify bel	

Please state in about 100 words, why you wish to join FIIB's PGDM Programme?

(Incomplete and illegible applications are liable to be rejected.)