

## Expression of Interest Form MBA 2017

APPLICANT					
Name					
(In block letters-exactly as it appears	in official documents)				
Date of Birth	Y Y Y Y	Age years		Photo	
Gender Male Female	E-mail id				
Phone No Home:	andline with area code)	Mobile:			
Permanent Address					
Door No. & Street					
Area					
City					
State			Pin Code		
Religion	Caste	F	Place of Birth		
If Physically ChallengedYes	No. If yes, state the	e nature			
Entrance Test TakenMAT (Enclose score card)	ScoreTAN	NCETScore _	None		
*Eligibility: Candidates who have qualifying degree examination as per		the Bachelor's degree from a	recognised University an	d have obtained at <b>least 50%</b> in the	
Office Use Only					
SSLC:	Selected	Wai	tlisted	Rejected	
HSC:	Comments if any:				
UG%:* 50% and above					
No. of Reappearance:					
	Panelist			Director	

FAMILY					
Parent : Father					
Name					
Phone	 Home	 Work			
Home address: Door No. & Street:		WOTK			
State :	Pin Code:				
Email	Qualification				
Occupation	Employer&City/Town				
	Annual Income				
Parent : Mother					
Name					
Phone					
Phone	Home	Work			
Email	Qualification				
Occupation	Employer&City/Town				
	Annual Income	<del></del>			
Guardian					
Relationship to you					
Name					
Phone	Home	 Work			
Home address: Door No. & Street:					
Area :					
		Pin Code:			
	5533.				
Email	Qualification				
Occupation	Employer&City/Town				

## **EDUCATION**

Give details of your education and **enclose all the certificates** including TC from previous Institution and migration certificate if from other than Anna University

<b>s X</b> . Name & Location of the school_				
Type of School: Government	Private	Board:	State	_ Matric CBSE
Year of Completion	Percentage of Marks	<del></del>		
Academic Honours received				-
<b>S XII</b> . Name & Location of the school				-
Type of School: Government				_ Matric CBSE
Year of Completion	Percentage of Marks			
Academic Honours received				-
lors Degree. Name & Location of the	College			
University		Type of stud	dy Regu	ılarCorrespondence
Degree & Branch				
Year of Completion	Percentage of Marks*			
Academic Honours received				_
s Degree. Name & Location of the Co	ollege			
University		Type of stud	dy Regu	ılarCorrespondence
Degree & Branch	Year of Completion		Pe	rcentage of Marks
Academic Honours received				-
her diploma/ certification courses				
iei dipionia/ certification courses				
Name of the course	Certifying Agenc	y/ Body		Month & Year
Name of the course	Certifying Agenc	v/ Bodv		Month & Year
31 110 000100	201.11.j.11.g / .go110	,,		

	WORK EXPERIENC	Е		
Period	Designation & Organisation	Location		
(Enclose experience certificate)				
	SPORTS & EXTRA-CURRI	CULAR		
Class/ Degree & year	Event	Award Won Institutional/ District/State/ Na		
(Enclose annexure if more and als	to all the certificates)			
	YOUR NEEDS			
Do you require hostel accomm	odation? Yes No			
Do you require transportation f	facility? Yes No			
Do you like to take a part-time	job in campus?YesNo			
Would you like to	d you like to be an entrepreneur seek a job			
Do you like to organize events	Yes No			
In which sport/s you would like	to participate			
In which extra-Curricular activi	ties you would like to participate			
Date		Signature of the Candidate		
Date of Receiving	Name of Receiving Authority	Sign. of Receiving Authority		