

ADMISSION FORM



MR DAV INSTITUTE OF MANAGEMENT STUDIES

(Approved By A.I.C.T.E., Govt. of India & Affiliated to M.D. University, Rohtak)

5th KM STONE, SONEPAT ROAD, ROHTAK-124023

SESSION:

Affix a
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Course Applied forMAT /CETMCA Rank.....

University Registration No :

Name of the Candidate Mr./Ms.Category

Father's Name :Father's Occupation

Mother's Name :

Date of Birth : Male / Female

Permanent Address :

_____ Pin _____

Mobile _____

E-mail _____

In case of Emergency Please Notify :-

Name & Address _____

Phone No. _____

Academic Record (Please attach the attested copies of Certificates)

Examination Passed	University/ Board	Year of Passing	Roll No.	Marks Obtained	Max Marks	% age of Marks
SSC/10th						
Senior School / 10+2						
B.A./B.Sc/B.Com./ B.Tech						
Any other examination						

Do you have Maths as one of the subject at 10+2/Graduation Level (For Admission in MCA Only) Yes/No

Were you ever disqualified by any University/Board to appear in any Examination? If yes, give detail :-

DECLARATION BY THE CANDIDATE

I _____ S/o / D/o Sh. _____ declare that entries made by me in this application form are true in all respect and in case, any information is found to be false, this shall entail automatic cancellation of my admission.

I note that my admission to the Institute / University are subject to the provision of the Institute / University. I am fully aware of the law regarding ragging as well as the punishment and that if found guilty on this account, I am liable to be punished appropriately. I understand that fee once deposited will not be refunded or adjusted in any circumstances and hence I will not claim for refund of any fee. I will not leave the Institute during the course. If I do so then, I shall pay all the fees & dues for the full duration of course.

Signature of the Parents/ Guardian

Signature of the Applicant

Date :-.....

Date :-.....

Place :-.....

Place :-

ENCLOSURES :-

1. Admission Slip of MAT / CETMCA Rank
2. Photocopy of 10th, 12th & Graduation DMC / Certificate.
3. Migration Certificate for other than M. D. University Candidate.
4. 06 Passport Size Photograph

Mr./Ms. _____ S/o / D/o Sh. _____ is admitted to the course of _____ in this Institute.

Date :-

Co-ordinator-Admissions

Principal

(For Office Use Only)

Course _____ **College Roll No.** _____

Details of Fee :

1) Fees Approved Annually _____

2) Fee Paid Rs. _____ **Receipt No.** _____ **Date** _____

Accountant