



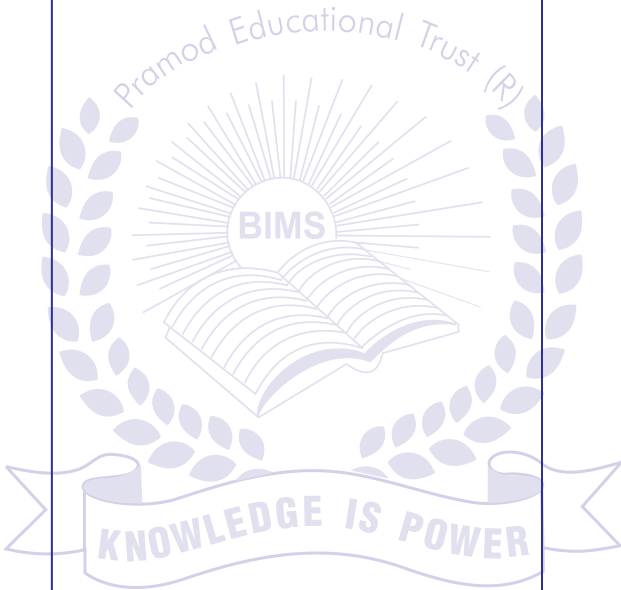
#### 4. Academic Qualifications

Sl. No	Examination	Name of the Institution	Name of the University / Board	State	Percentage Scored Year / Semester	Year of Passing	Mode of Study	Main Subjects																		
1.	X Class						<input type="checkbox"/> Full-Time																			
2.	XII Class						<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Correspondence																			
3.	Name of the Degree (Graduation)				<table border="1"> <tr> <td>I</td> <td></td> </tr> <tr> <td>II</td> <td></td> </tr> <tr> <td>III</td> <td></td> </tr> <tr> <td>IV</td> <td></td> </tr> <tr> <td>V</td> <td></td> </tr> <tr> <td>VI</td> <td></td> </tr> <tr> <td>VII</td> <td></td> </tr> <tr> <td>VIII</td> <td></td> </tr> <tr> <td>Aggregate</td> <td></td> </tr> </table>	I		II		III		IV		V		VI		VII		VIII		Aggregate			<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Correspondence	
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VI																										
VII																										
VIII																										
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4.	PG Qualification (if any)						<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Correspondence																			
5.	Other Professional Qualifications (if any)						<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Correspondence																			

## 5. Entrance Exam Scores

Exam	Reg. / Roll No.	Date	Percentile	Composite Score
e.g. MAT/GMAT/CAT		December 02, 2007	95.04	707.50

## 6. Work Experience (If any)

Designation and Nature of Work	Duration (From & To)	Name & Address of Employee
		

## 7. Family Background

Parent's / Guardian's Name : Mrs. / Mr. ....

Relationship with the Applicant : .....

Qualification : .....

Occupation:  Service  Own Business  Professional Others ..... (Specify)

Designation : ..... Organization .....

Address : .....

.....

.....

Telephone : Off : ..... Res. .... Mobile .....

(STD Code) - Number

(STD Code) - Number

(STD Code) - Number

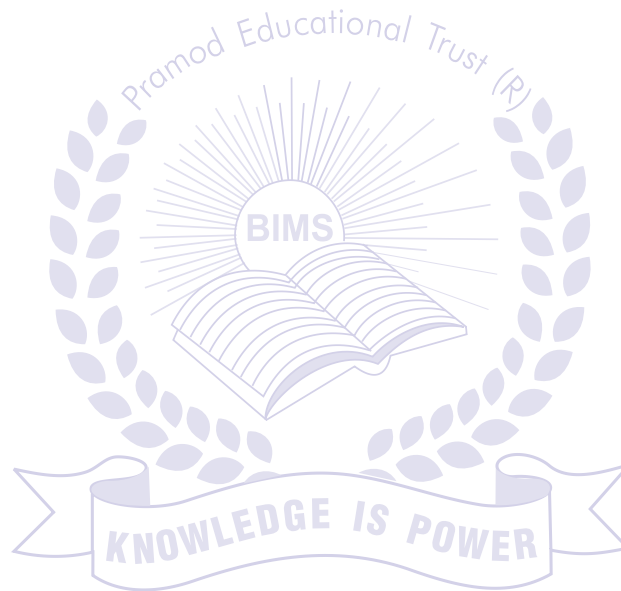
## 8. Do you need hostel accommodation ?

YES

NO

## 9. Purpose of study

Describe your purpose to study in BIMS.



### Declaration

I hereby certify that the information furnished in the Application form is complete, accurate and true. I have carefully read the contents of the Brochure. If admitted, I agree to abide by the rules and regulations of BIMS as may be in force from time to time. I understand that any information furnished falsely and / or a misrepresentation is a sufficient ground for summarily cancelling my admission and / or will result in the expulsion from BIMS.

Date

Signature

Place

### Application Fee

Please enclose along with duly filled Application Form, a non-refundable application fee Rs. 900/- in the form of Crossed Demand Draft in favour of "Bangalore Institute of Management Studies (BIMS)" payable at Bangalore

Application Fee Details	Enclosures TRANSCRIPTS / MARKS CARDS	FOR OFFICE USE ONLY
DD No. .... Date : .....	X	Verified by .....
Bank .....	XII	
Amount .....	Degree (I, II, III, IV, V, VI)	
	Provisional Degree Certificate ( <i>Duly attested by the Registrar of Affiliated University</i> )	
	Transfer Certificate	
	Migration Certificate	Authorised Signatory
	Entrance Exam Score Card	