



# APPLICATION FORM FOR ADMISSION



Please complete the form in block letters

## 1. APPLICATION FOR

- BBA (Hons.) Business Administration
- BBA (T&H) (Hons.) Tourism & Hospitality
- BCA (Hons.) Computer Applications
- MHA Hospital Administration
- Other

Affix a recent colour photograph

## 2. PERSONAL DETAILS

Name of the Applicant \_\_\_\_\_

Date of Birth

Category      Sex

Nationality \_\_\_\_\_ Blood Group \_\_\_\_\_ Landline with STD Code \_\_\_\_\_

Mobile \_\_\_\_\_ Email Id \_\_\_\_\_

## 3. ADDRESSES

Permanent Address	Address for correspondence (if different)
_____	_____
_____	_____

Pin Code \_\_\_\_\_ Pin Code \_\_\_\_\_

## 4. DETAILS OF GUARDIANS

Father's Name _____	Mother's Name _____
Occupation _____	Occupation _____
Contact No _____	Contact No _____

## 5. EDUCATIONAL QUALIFICATION

Exam Passed / Appeared	Year of Passing	Board / Council	Medium	Division Grade	Subjects
X th					
XII th					
Graduation					
Any other					

## 6. EXTRA CURRICULAR ACTIVITIES (If any)

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## 7. HOBBIES

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## 8. SOURCE OF INFORMATION

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## 9. DECLARATION

I hereby declare that the information given by me is true to the best of my knowledge.

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Signature of the applicant