



**LAL BHADUR SHASTRI INSTITUTE OF MANAGEMENT & TECHNOLOGY, BAREILLY**

(Recognised by the All India Council for Technical Education (AICTE), Ministry of HRD, Govt. of India)

29, THEATRE ROAD, CANTONMENT, BAREILLY - 243001

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Form No. ....

to be given by office

**Two Year (Full-Time) Post Graduate Diploma in Management (P.G.D.M.)**

**2010-2012**

**Application Form**

(To be filled by the applicant)

Affix your recent  
coloured  
passport size  
photograph here

1. Full Name.....  
(IN Capital Letters)

2. Date of Birth ..... 3. Sex Male  Female

4. Correspondence Address .....  
..... PIN ..... Phone ..... Fax .....  
email .....

5. Permanent Address .....  
..... PIN ..... Phone ..... Fax .....

6. Nationality ..... 7. State of Domicile .....

**8. Category : General  Corporate Sponsored**

**8 (a) Centre for GD & Interview# : Bareilly  Kolkata  Mumbai  Bengaluru  Chandigarh**

9. (a) (i) Name of the qualifying written Exam..... (b) (i) Name of the qualifying written Exam.....  
(ii) Date on which exam was held ..... (ii) Date on which exam was held.....  
(iii) Registration/Enrolment No ..... (iii) Registration/Enrolment No. ....  
(iv) Score in percentile (% below)..... (iv) Score in percentile (% below).....  
(v) Centre Code..... (v) Centre Code.....

# Subject to feasible number of candidates opting for the centre.  
\*Please attach an attested copy of the scorecard if received, otherwise attach a copy of your admit card.

10. Father's Name/ Husband's Name ..... Mother's/ Wife's Name.....  
 Occupation..... Occupation .....  
 Official Address ..... Official Address .....  
 .....  
 Phone/ Fax ..... Phone/ Fax .....

11. Academic Qualifications

EXAMINATION	YEAR OF PASSING OUT	NAME OF SCHOOL / COLLEGE ALONG WITH NAME OF BAORD / UNIVERSITY	NAME OF DEGREE & IMPORTANT SUBJECTS	PERCENTAGE OF MARKS OBTAINED
10th				
12th				
Graduation (Specify)	I year			
	II year			
	III year			
<b>Any Other</b>				

12. Academic Awards/ Extra Curricular Activities etc.

.....  
 .....

13. Work Experiences, If any

Organisation	Designation	From	To	Monthly Salary

DECLARATION

**I declare that the information given in the application form is true. I also declare that I have not applied earlier with the same written score in the same category. The application, if found incorrect, at any stage, may be rejected without notice.**

Date .....

Signature of the Applicant