



INSTITUTE OF MANAGEMENT AND INFORMATION TECHNOLOGY CUTTACK-753007

(A Constituent College of Biju Patnaik University of Technology, Odisha)

APPLICATION FORM FOR ADMISSION TO POST GRADUATE PROGRAMMES

FOR USE IN THE OFFICE

INDEX NO. :

ROLL NO. :

COURSES INTO WHICH ADMISSION SOUGHT :

PERSONAL DATA

1. Name : Sri / Smt. / Kum. _____
(In BLOCK Letters) First Middle Surname

2. Father's/Guardian Name : _____

3. Correspondence Address : _____

Permanent Address : _____

Telephone No. Office : _____ Mobile No. _____

4. Date of Birth : _____ E-mail ID:- _____

5. Sex : MALE FEMALE

6. Nationality :

7. SC/ST :

8. Academic Qualification :

College / University	Examination Passed / Degree Completed from HSC	Year	% of Marks Obtained		Class/ Division
			Aggregate	Honours	

9. Work Experience :

Sl No.	Name of the Organization	Position held	Period of Service	
			From	To

10. Details of Practising Professionals

Sl. No.	Nature of Practice	Place of Practice	Period of Practice	
			From	To

Declaration

I have carefully read the instructions and I agree to abide by the decision of the Institute's authorities regarding my selection for the programme. I certify that the particulars given by me in this form are true to the best of my knowledge and belief.

Place : _____

Date : _____

Signature of the Applicant