

FOR OFFICE USE ONLY

Gen. Reg. No.				Roll No.	Category						Nature of Admission	
					OMS	OPEN	OBC	SBC	SC	ST	VJNT	
Scholarship				Minority	GOI	Freeship	EBC	Other	State			



**Kai. Yashodabai Dagadu Saraf Charitable Trust's
INSTITUTE OF MANAGEMENT AND SCIENCE**

Sakegaon Bhusawal Dist. Jalgaon (M.S.) 425201
Phone (O)-(02582)255124

APPLICATION FOR ADMISSION TO

B.B.A. _____ 20 -20

To,
The Director,
Kai Yashodabai Dagadu Saraf Charitable Trust's,
Institute of Management And Science, Sakegaon Bhusawal Dist- Jalgaon (M. S)

Small Passport
Size Photograph
to be pasted

Sir,

I hereby submitting my application for admission in _____

My details are given below.

DETAILS OF THE STUDENT (Capital Letters Only) (Use Black Pen Only)

1	Last Name	:																
	First Name	:																
	Middle Name	:																
2	Fathers Full Name	:																
3	Mother Name	:										Mother Tongue						
4	Gender	:	MALE			FEMALE							Marital Status					
5	Category	:	Cast						Sub Cast									
6	Permanent Registration No.	:																
7	Permanent Address Village, Tal., Dist. with Pin code	:																
			Pin Code :-															
8	Contact Number Student	:	Ph. No.						Mob. No.									
9	Contact Number Parents	:																
10	E-mail	:																
11	Domicile District of Parents	:																
12	Domicile State of Parents	:																
13	Date of Birth and Place	:							D	D	M	M	Y	Y	Y	Y		
14	Blood Group	:	Income			Father Occupation												
15	SSC School Name	:																
16	HSC School Name	:																
17	Last School Name	:																
18	Adhar Number	:																
19	Bank Name	:																
20	Branch Name	:																
21	Branch Code (MICR)	:																
22	Bank IFSC Code	:																
23	Bank Account Number	:																
24	Weight	Kg	:	Height		Cm												
25	Election Voter Id No.	:																

DETAILS OF QUALIFYING EXAMINATION

Name of the Degree Examination	College form which appeared	Name of the Board of University	Exam. Seat No.	Year of Passing	TOTAL Marks	OUT OF Marks	%
10 th							
12 th							
B.A / B.Com. / B.Sc or other							
P. G.							
Other							

DOCUMENTS TO BE SUBMITTED

Sr. No.	DOCUMENT	ORIGINAL	XEROX
1	MH-CET		
2	SSC Marks Statement		
3	HSC Marks Statement		
4	School Leaving or T.C.		
5	Cast Certificate (For M.S.)		
6	Cast Validity Certificate (For M.S.)		
7	Non Creamy Layer Certificate (For M.S.)		
8	Domicile Certificate		
9	Nationality Certificate		
10	Migration Certificate (For OMS)		
11	Gap Certificate (If applicable)		
12	Marks Statement Last Year		
13			

Specialization	
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I hereby declare that, all the information given above is true and correct to the best to my knowledge.

Signature of Guardian

Signature of the candidate

PLACE: SAKEGAON

DATE: / /20

CHECKED BY (OFFICE)	VERIFIED BY	SIGN OF DIRECTOR