

Shri Khanderao Pratishthan's

DIMR

Dnyansagar Institute Of Management & Research

(Approved by AICTE, New Delhi, Recognised by Govt. of Maharashtra & Affiliated to the University of Pune.)
S. No. 4/2, 4/3, Near Shiv Chhatrapati Sports Complex, Balewadi, Pune - 411045
Phone : 020 - 66280274 / 66280294 Fax : 020 - 66280001, E-mail : director@dimr.edu.in

APPLICATION FOR MCA (Lateral Entry)

Note : Please fill in complete and correct information, Incomplete application will be rejected.

To,
The Director,
D.I.M.R. Pune, India

I hereby apply for admission in MBA course for the year 20 - 20 in DIMR. I understand that confirmation of my admission is subject to fulfilling of eligibility conditions in stipulated time frame, prescribed by AICTE / DTE / Pune university and other competent authority.

Photo

PERSONAL INFORMATION (CAPITAL LETTERS ONLY)

Name in Full : _____
Surname First Name Father's/Husband Name

(In case of married women kindly mention the name that appears on your graduation certificate, else enclose a copy of your marriage certificate for your changed name.)

Local Address : _____

City : _____ State : _____ Pin Code : _____ Tel No. : _____

E-mail : _____ Mobile No. : _____

Res. Phone No. (with STD code) : _____

Permanent Address : _____

City : _____ State : _____ Pin Code : _____

Date of birth (in figures) : Blood Group : _____ Sex : _____ Marital Status : Married Unmarried
D D M M Y Y Y Y

Father's / Mothers / Husband's Name, Occupation and address for Communication _____

_____ E-mail : _____ Annual Income : _____

Category (Only for students graduating from Maharashtra) OPEN SC ST DT NT OBC / SBC / VJ

(Please Attach latest copy of the attended certificates) Religion : _____

Nationality : Indian Other Passport No.: _____ Visa No. : _____

Hobbies : _____

Recognition / Awards (if any) : _____

Medical Problem / allergy (if any) : _____

Would like to avail bus Facility : Yes / No

Education Details (mention all University / Board exams passed / appearing)

Examination	Degree / Diploma Name with Specialization if any	Name of College / Institute	Board / University	Year & Month of Passing	%	Remarks
S.S.C.						
H.S.C.						
Bachelor's Degree						
Post Graduate Degree						
Any Other						

Please mention in 'Remark' column if you appeared final year of graduation and awaiting results

Attach: - FC Confirmation Letter
