



VAISHALI INSTITUTE OF BUSINESS AND RURAL MANAGEMENT

(Approved by AICTE, New Delhi & Affiliated to B.R.A., Bihar University)

Institutional Area, Narayanpur Anant Road, Muzaffarpur-842002

LIAISON OFFICE : PANDEY PLAZA, EXHIBITION ROAD, PATNA - 800001

APPLICATION FORM FOR ADMISSION TO TWO YEAR FULL TIME M.B.A. COURSE

For Office use only :

MAT SCORE

GD/PI GRADE

Admit

Pending

Reject

IPO/DD No. for sum of Rs.....

Signature of the Admission Authority

CATEGORY : General / SC / ST / OBC

Registration No.

Roll No. for M.B.A. Course

Affix recent
Passport size
Photograph duly
signed by the
applicant

(Please ensure to fill up this form in Capital letters)

1. Name :
Sur name Middle name First name

2. Sex : Male / Female

3. Father's Name :

4. Mother's Name :

5. Nationality :

6. Age :

7. Marital Status : Marries / Unmarried

8. Date of Birth : Date Month Year

Place of Birth :

9. Mother Tongue

10. Language known (a) Speak

(b) Read

(c) Write

11. Do you belong to SC ST OBC

(Tick the appropriate box and attach a certified copy of certificate from District/Subdivisional Magistrate)

12. Special Claims, if any :

13. Discipline of your Bachelor's Degree

14. **Educational Qualification :**

Examination Passed Class 10 onwards	Class or grade	Subjects	School/ College	Board/ University	%of Marks	Year

15. Additional Qualification (if any)

16. Indicate your reasons for opting for M.B.A. course (in about fifteen words) :

17. Indicate your extra-curricular activities :

18. Particulars of Father/Guardian :

(a) Occupation (b) Total Monthly Income in Rs.

19. Mailing Address

.....

P.O./District Tel. No E-mail



20. Permanent Address

.....

P.O./District Tel No E-mail

21. Domicile

22. Give two references (must not be related to the applicant) :

Name (a) (b)

Address

Tel No.

Profession

DECLARATION

I hereby declare that the information furnished in this form is correct and true to the best of my knowledge. I undertake that in the event of false information appearing in this form, my admission will stand automatically cancelled. I agree that all the fees once paid to the institute will be non-refundable in any form.

Date:

.....

(Signature of the Applicant)

