



भारतीय प्रबंध संस्थान तिरुचिराप्पल्लि

INDIAN INSTITUTE OF MANAGEMENT TIRUCHIRAPPALLI POST GRADUATE PROGRAMME IN BUSINESS MANAGEMENT APPLICATION FORM (2016-2018)

- Note:**
1. This application comprises 9 pages. All fields other than those marked as 'For office use' are mandatory.
 2. Attach relevant certificates/documents/photographs wherever mentioned.
 3. Applications incomplete in any respect will be summarily rejected.
 4. Last date for receipt of applications: Monday, June 6, 2018.

FOR OFFICE USE

Application number (for office use):

Test registration number (for office use):

PERSONAL DETAILS

1. Full name (in capital letters):

2. Address for communication:

.....

.....

..... Pin code

3. Phone No(s):

4. Mobile No(s)*:

5. Email*:

6. Alternate Email:

7. Nationality:

8. Sex**: Male Female 9. Date of birth (DD/MM/YY):

10. Category (Please tick appropriate box and enclose certificate if applicable):

SC ST OBC (Non-Creamy) Others

11. Are you disabled? (As defined in the Persons with Disability Act, 1995; enclose certificate if applicable):

Yes No

12. State of domicile:

(* Please ensure their validity till the end of the PGPM admission process. All communications would be to this phone number and email ids only; ** For statistical purposes only)

Affix a recent colour
passport size
photograph here

13. Application Fee: (Please attach a Demand Draft for Rs. 2,000/- drawn in the name of Indian Institute of Management Tiruchirappalli, payable at Tiruchirappalli; Or, alternatively, the application fee is to be remitted through NEFT SB A/c No. 32170808935; IFSC Code: SBIN0001617 of SBI, NIT Campus. Attach a printout of the screenshot of the payment made along with the completed application)

Demand draft/ NEFT transaction number	Date	Name of the bank

(In the case of SC / ST candidates the Application Fee will be Rs. 1000/-; such candidates are required to attach a copy of the relevant caste certificate with the application)

14. (a) Have you taken CAT 2015/GMAT between May 1, 2015 and April 30, 2016? Yes No

14. (b) If yes to 14(a), do you wish CAT 2015/GMAT score to be considered in the place of PGPBM

Written Test 2016? Yes No

14. (c) If yes to 14(b), please attach your CAT 2015/GMAT score card. Attached Not attached

SECTION 1 - ACADEMIC RECORD

15. Pre-Degree (Fill only if it is a Board/University examination)

Standard	Board/University	Year	Maximum marks	Marks obtained	Class/ Division	% of marks obtained
X						
XI						
XII						

16. Graduation

Degree (B.A., B.Tech., etc.): **Discipline** (Arts, Engineering, Science, etc.):

Subject of specialization (Civil, Literature, Physics etc.):

Name of the college:

Name of the University/Institution:

Year	Dates		Maximum marks/GPA	Marks obtained/GPA	% of marks obtained	CGPA/ CPI
	From	To				
1 st Year						
2 nd Year						
3 rd Year						
4 th Year						
5 th Year						
Total:						

17. Post-graduation (if applicable)**Degree** (M.A., M.Tech., etc.): **Discipline** (Arts, Engineering, Science, etc.):**Subject of specialization** (Civil, Literature, Physics etc.):**Name of the college:****Name of the University/Institution:**

Year	Dates		Maximum marks/ GPA	Marks obtained/GPA	% of Marks obtained	CGPA/ CPI
	From	To				
1 st Year						
2 nd Year						
3 rd Year						

18. Professional qualifications (CA/ICWA/CS etc.):

Name of Qualification	Dates		Maximum marks/	Marks obtained/GP	% of Marks obtained	CGPA/ CPI
	From	To				

SECTION 2 – WORK EXPERIENCE**19. Total full time work experience in months as on the last date for receipt of completed PGPBM application, i.e. June 6, 2016 (Minimum 36 months):****20. Full time work experience** (Do not include training or project or any work done as a part of curriculum requirements; Start with latest work experience first; Attach additional sheets if needed):

Name of the organisation	Period and Salary	Designation & Brief job profile
	From (mm/yy):	
	To (mm/yy):	
	Number of months:	
	Gross emolument per month	
	last drawn (in Rs.):	

Name of the organisation	Period and Salary	Designation & Brief job profile
	From (mm/yy):	
	To (mm/yy):	
	Number of months:	
	Gross emolument per month last drawn (in Rs.):	
	From (mm/yy):	
	To (mm/yy):	
	Number of months:	
	Gross emolument per month last drawn (in Rs.):	

21. Current/Latest full-time work experience

Provide a detailed job profile of your current/latest full-time work experience

SECTION 3

22. What are your career goals? How will IIMT's PGPBM help you achieve these goals?

23. What are your strengths?

24. What are your hobbies and other off-work activities?

25. Describe few instances where you demonstrated leadership/team-building skills?

26. Describe one experience that in your view is a failure.

27. List any awards/achievements.

28. What are your specific expectations from IIMT’s PGPBM?

29. Provide any other information relevant to your application to IIMT’s PGPBM.

SECTION 4: OTHER DETAILS

30. Marital Status*:

31. Details of the person to be contacted in case of emergency:

Name: Relationship :

Address:.....

.....

..... Pin code:

Phone: Mobile:.....

Email:

(* For statistical purposes only)

32. How did you come to know about PGPBM?

- (a) From a friend
- (b) From a colleague at work
- (c) From a relative
- (d) From a promotional poster at work
- (e) From a newspaper advertisement, If yes, please mention name of newspaper
- (f) From an online ad, If yes, please mention name of website
- (g) From a promotional mailer

SECTION 5: DECLARATION

33.

- (a) I have read and understood all the terms and conditions of the programme available in the *PGPBM Programme Brochure* (available at IIMT’s website) and agree to abide by all the terms and conditions of the programme.
- (b) I certify that the information given in this application form is correct and true to the best of my knowledge.
- (c) I also understand that at if any stage, if it is found that any information provided by me is incorrect, my candidature for the programme will stand cancelled, and I will not be entitled to any refund of fee or any other compensation.
- (d) I agree to abide by the decision of the Institute’s authorities regarding my selection for the programme.

Date.....

Signature.....

Place.....

Name.....

For Office Use only

Remarks

Admitted / Provisionally admitted / Waitlisted /

Not admitted

Roll Number: