

ADMISSION FORM

Registration No: _____

INDIAN INSTITUTE OF MANAGEMENT & SCIENCE

Plot No-622, AT/PO- Palaspur, Bhubaneswar, Khordha-752054
 Mob No-9583862625, 9937102759, 9040165328, 8328943132, 7008072532

Recognised by Regional Directorate of Education, Bhubaneswar & Affiliated with Utkal University

FOR OFFICE USE ONLY

SSP- Primary- A/C-

COURSE: BBA MFC BJMC BCA B.Sc. Data Science

B.Sc. Hon. In Bio-Tech MA-PMIR M.Sc. Com. Sc

(FILL IN THE FORM WITH THE CAPITAL LETTERS ONLY & PUT ✓ MARK WHERE NECESSARY)

1. NAME OF THE CANDIDATE : _____

2. FATHER'S/HUSBAND'S NAME : _____

3. MOTHER'S NAME : _____

4. DATE OF BIRTH : _____

5. RELIGION : HINDU MUSLIM SIKH CHRISTIAN

6. NATIONALITY : INDIAN OTHER

7. GENDER : MALE FEMALE

8. CATEGORY : GEN OBC SC ST

9. UID/Aadhar No : _____

10. PRESENT ADDRESS : _____

11. PERMANENT ADDRESS : _____

12. MOBILE NO _____ PARENTS MOBILE NO _____

13. E-MAIL ID _____

14. EDUCATIONAL QUALIFICATIONS:

EXAM PASSED	BOARD/UNIVERSITY	YEAR OF PASSING	% OF MARK'S/ GRADE

15. Person to be contacted (In case of Emergency)

NAME _____ MOB NO. _____

ADDRESS _____

16. Documents to be submitted

Description	Original	Xerox
10th certificate		
Intermediate/12th Certificate		
+3 / Degree Certificate		
Migration Certificate		
CLC / Transfer Certificate		
Conduct Certificate		
Caste		
Passport Size Photo		
Parents Income Certificate		
Residency / Natively Certificate		
Any other Document Specify		

17. If Physically handicapped (Tick) Yes No

If Yes, Please State the Nature of Handicapped _____

18. Fee Particulars

Name				Course		
Year	Tuition Fee/ Admission Fee	Uniform Fee	Hostel Fee	Placement Fee	Registration Fee	Other Fee
1st						
2nd						
3rd						

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Student's Signature

Parent's signature

Authorised signatory

Declaration

1. I will not approach the competent authority for cancellation/refund of fee/transfer etc., under any circumstance after the fee is paid.
2. Either my-self or my son/daughter will not approach the college authorities for the return of original certificates (SSC Marks list, Study and Nativity certificates) etc.
3. My ward will abide by the rules and regulation of the college till he/she complete the course.
4. We declare that the information furnished above is true and correct to the best of our knowledge and belief. We abide by the rules and regulations of the college prevailing form time to time.

Date _____

Place _____

Signature of Parents

Signature of Students