

Ignited Minds Society's Market Barrier Barrier



Form No.: _____

Promoted and Managed by ISB&M, Nande - Pune

Gat No. 237-243, Sambhave, Mulshi, Pune - 412108, Website: www.mgi.ac.in, Email: admission@mgi.ac.in

Note: The Application Form and Prospectus will be issued only in the name of the applicant. The Form is not transferable. Please fill in with your own handwriting. May attach any additional inputs, but no original copies of certificates or mark sheets.

Single Application Form for Admission to

Mulshi Institute of Business Management

Post Gr	aduate D	iploma in N Batcl	<i>l</i> lanager h : 2026-	•	OM) Progr	amme	Attach your photograph and sign									
Form has Section	ns A, B, C, D & E	E. (Complete all Sec	tions and don	't skip any Sectio	n, Fill the form in	Capital Letters)	00000									
MIBM Program	me is Dual Spe	cialization Program	me. Choose	your primary car	eer interest:											
Marketing Finance Human Resource (HR) Logistic & Supply Chain Management (Note: For Engineering, BSC & B.Pharma Graduates only. SECTION A:																
								Choice of Centre for Group Discussion (GD) and Personal Interview (PI):								
								•		angalore, Bhubanes	•	-			•	
•		nshedpur, Kolkata, L			•	Ranchi, Varanasi,	, Vijayawada)									
Identification I	Number and So	COre: (Candidate mus	t have any one s	score to be eligible to	apply)											
Entrance Exam	CAT	XAT	MAT	CMAT	GMAT	ATMA	CET									
Identification																
Number Score in																
Percentile																
SECTION B:																
Personal Infor																
First Name:Surname: Father's/Guardian's Name:																
								Mother's Name:								
Professional Ba	ckground of Pa	rent/Guardian:														
Date of Birth:		Height:		Weight:	E	Blood Group:										
	(dd/mm/yyyy)															
Any Major Ailment or Sickness: Nationality:																
Person with Dis	ability: Yes	No If yes,	mention:		Aadhaar No	o:										
Are you a meml	oer of SC/ST/OI	BC: Yes No	If ves.	mention the cate	gory:											
Contact Inform					37-											
Present Addres																
City/Village:		District:		State:	P	in Code:										
Parents Mobile	No :	Mobil	e:	E-ma	ail:											
Permanent Add	ress:															
City/Village:		Post office:		State:	P	in Code:										
Parents Mobile			e:		ail:											

SECTION C: Educational Background (Attach photocopies of the certificates)

Course	University/Board	Institute	Year of Passing	Subjects / Stream	Mark * (%)	Class/ Grade
Std. 10						
Std.12						
Graduation**						
Others						

^{*} For Graduation, please give aggregate of mark of all years. If appearing for final year, mention aggregate of 1st & 2nd years

** Mention BA, B.Sc., B.Com., BBA, B.Tech., B.E. (Mechanical, Electrical) etc. (Furnish work experience certificate)

Sr. No	Company	From	То	Position held/KRAs	Location
Vhat are your car	reer growth expectations?	_			
SECTION E: About MIBM					
How did you hear	about MIRM2 Print	Media	Friends	Counseling Center	Other Sources
now did you near	about WIDW!	iviedia	rnenus	Counseling Center [Other Sources
Vhy do you think	MIBM is the best option?				
Career Goals:					
Where do you see	e yourself five years from now	?			
Mention your stre	ngths and weaknesses:				
What qualities do	you have which will make you	a committed ar	nd respor	sible professional in corporate fi	ield?
Payment Details	 :				
Online			Offlir	10	

Undertaking:

- 1) I hereby submit to the jurisdiction of the Pune court in the event of any dispute. I have carefully noted the rules and process of admission as given in the prospectus which I am required to follow and shall in matters of interpretation; accept the decision given by the Director in this respect as final and binding.
- 2) I shall conduct myself as per the rules and norms of MIBM, failing which I shall not approach the Director for any concession in this regard and shall be liable to be debarred from the Institute. Manual of Policy will be provided at the time of admission.
- 3) I have also read, understood and accepted the code and conduct of the Institute and shall take note of all communication put from time to time.

Date:	Ciamatuma af tha Amaliaant
Date:	Signature of the Applicant