



Jagan Institute of Management Studies, Delhi

Group of Institutions

E-mail: jims@vsnl.com, admissions@jimsindia.org Website: www.jimsindia.org

Note: Please read the form carefully before filling it.

Fill in the form in capital letters.

Incomplete forms will be rejected without any intimation.

Affix your recent passport size photograph here

PGDM (International Business)

50%

500

50

1.	Name Mr./Ms. First and Second Name Last Name
	(The name should be as per the certificate of the last examination passed)
2.	Email : Mobile No. :
3.	Registration No. (to be given by the office)
4.	Course (s) applied for* : PGDM PGDM (Retail & Marketing) PGDM (International Business) (Tick the appropriate)
5.	Details of the Qualifying examination (Any one of the following):
	Examination
	(a) CAT Roll No. Percentile Score Composite Score
6.	Preference for GD/PI Centre :**
	Delhi Bhubaneswar Varanasi Indore Kolkatta
	Ranchi Jabalpur Guwahati Gorakhpur Jaipur
	Raipur Chandigarh Dhanbad Patna Lucknow
	Mumbai Almora
	A student can opt for more than one program in the same application form with no additional cost.
,	Please check your eligibility before ticking the appropriate box(es).

PGDM (Retail & Marketing)

50%

500

50

PGDM

50%

600

70

Minimum Marks in Graduation***

Minimum MAT Composite Score

Minimum CAT Percentile

Particulars

^{**}The Institute reserves the right to change/cancel any centre other than JIMS premises.

^{***}Students appearing in final year can also apply.



7	Damanal Data	_						
	Personal Details :	Date	Month Ye		•			
	a) Date of Birth:			(b)	Age :			
	(c) Nationality:			(d)	Blood Gro	oup:		
	(e) Marital Status:			(f)	Gender:			
	(g) Any Permanent	Disability		(h)	Language			
					other than	ı English		
8.	Detail of Parents :							
	Particulars		Father			Mother		
	Name							
	Occupation							
	Office Address							
	Office Tel No.							
	Mobile No.							
	Email Id							
9.	Income of Parents -	Rs		Per M	onth			
10. (a) Permanent Address								
						lo		
	(b) Address for Communication							
	c) Name and Address of Local Contact Person							
					Tel N	0		
11.	In case of emergence	;y						
	Name of the Contact Person Address					Tel. No. (Res., Off.) & Mobile		



1	2	Academic	Qual	lifications	

	Examination	Year	Subject/ Stream	Name of School/ College & Location (Mention full name)	Board/University (Mention the full Name)	Marks	% of Marks (overall)	Degree with stre specify, like BE/B. (Hons.)/B.Com	Tech/B.Com.
	Secondary (10th)								
	Sr. Secondary (10+2)								
	Graduation*								
	Post Graduation								
	Any other Degree/Diploma								
	Note: * If not yet completed, please give the details of the present status and aggregate percentage in graduation obtained till now. In case the final percentage comes to less than 50, the admission will automatically stand cancelled and no claim for refund of fees will be entertained. Participation in Extracurricular Activities								
(Attach separate sheet mentioning your special achievements if any.) 14. Hobbies / Special Interest									
15.	Professional Exp	perience	e (if any)						
	Name of the Company			ess of the ny & Tel. No.	From	Designat	ion	Job Profile	Salary
10					d the consequence				
16.	Friends/Far		now abou	t the Institute and Newspaper		lagazine		Websi	te 🗍
	Other Source			. to tropupor _		.agazii io		***************************************	
			 ıqazine/ne	ewspaper/website	oother sources				



Jagan Institute of Management Studies Delhi-110 085					
Cir.					
Sir, I wish to apply for admission to Jagan Institute of Management Studies, Delhi and promise to abide by the Rules & Regulations of the Institute. I certify that the information given by me in this application form is correct and complete to the best of my knowledge and belief. I understand and agree that misrepresentation or omission of facts will justify the denial or cancellation of admission, or expulsion. I further declare that I shall submit myself to the disciplinary jurisdiction of the Director of the Institute.					
I have read and do hereby consent to abide by the terms are prospectus.	nd conditions of admission as mentioned in the				
	Signature of the Candidate				
	Place				
	Date				
Parent's Declaration					
I undertake that my son / daughter	applying				
for admission to course wil	I be subjected to the Institute's disciplinary Rules				
and Regulations. I further undertake to pay all the dues of the li	nstitute in time.				
Date	Signature of the Parent				
Admission Provisionally Recommended					
Director General (Hon.)	Director				
Acknowledgement	Form No.				
Name	Registration No				
Checked By	Signature				