



KAZIAN

SCHOOL OF MANAGEMENT

Application Form

Course Name: _____

Specialization: _____

APPLICANT DETAILS

Name: _____
(Surname) (First Name) (Middle Name)

D.O.B. _____ Male Female
D D M M Y Y Y Y

Married: Unmarried: Nationality: _____

Father's/Husband's Name: _____

Mother's Name: _____

Correspondence Address: _____
P I N : _____

Permanent Address: _____
P I N : _____

Tel. No.: (M) _____
(R) with STD Code _____
(O) _____

E-mail: _____

Alternate E-mail: _____

Academic Details:

Qualification	Board/University	Passing Year/Month	Grade/Class	Specilization if any

Work Experience: (Starting with recent experience)

Company Name	City/state	Designation	From Year/Month	To Year/Month	Remarks

Exam Option: From Home: Study Center:

Fee Paid: Rs. _____ Cash/D.D./Cheque/C.C. No.: _____

Bank: _____

Declaration by the candidate :

I certify that all information provided in this application is complete and accurate. I agree to familiarize myself with all the rules and regulation of the programs set forth by KSBM and abide by them.

- Photocopy of Mark sheets and certificates in proof of all examination passed must be attached.
- The application form along with the bank Draft should be sent to the Institute though Courier /Speed Post.
- For more than one application photocopy of this application for may be used.

Date: _____

Signature: _____