

**MBA-General,  
Integrated, Executive  
MCA, MSC(IT)**

**UNIVERSITY OF MADRAS**

**INSTITUTE OF DISTANCE EDUCATION**

APPLICATION NUMBER

--

சேர்க்கை விண்ணப்பப் படிவம் / APPLICATION FOR ADMISSION  
M.B.A. General, Integrated, Executive M.B.A., M.C.A., M.Sc. (I.T.)

**ENROLMENT NUMBER** (to be assigned by the IDE office)

ACADEMIC YEAR 2017-2018

A	1	7																	
---	---	---	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

CALENDAR YEAR 2018

C	1	8																	
---	---	---	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

CANDIDATE TO FURNISH ALL THE REQUIRED PARTICULARS BELOW IN CAPITAL LETTERS

Candidate to tick (✓) any one of the appropriate boxes  
for Tuition Fee Concession - (Refer to Page No. 22)

Differently Abled  Prison

LANGUAGE CHOSEN FOR FOUNDATION COURSE  
(ONLY FOR 5 YEAR MBA INTEGRATED STUDENTS)

Name of the Course applied for		Main Subject	
--------------------------------	--	--------------	--

PERSONAL CONTACT PROGRAMME CENTRE				STUDY CENTRE / SPOT ADMISSION CENTRE AT WHICH ADMISSION IS MADE			
PCP Centre Code		Place		Centre Code		Place	

ADDRESS FOR COMMUNICATION (WRITE IN CAPITAL LETTERS)

NAME : \_\_\_\_\_  
Father's Name : \_\_\_\_\_  
Door No. & Street : \_\_\_\_\_  
Town / Village Post : \_\_\_\_\_  
District : \_\_\_\_\_  
State : \_\_\_\_\_ INDIA  
Pin code : \_\_\_\_\_  
Phone (Res) : \_\_\_\_\_ Off. \_\_\_\_\_  
Registered Mobile No.(RMN) : \_\_\_\_\_ E-Mail \_\_\_\_\_

Recent Passport  
Photograph signed by a  
Gazetted Officer /  
PRO/AR (IDE) /  
Faculty with Seal

1. NAME OF THE APPLICANT (as given in the certificate in CAPITAL LETTERS)	(a) in English :		(b) in Tamil:	
2. Father's Name (a) Expantion of Initial				
3. (a) Date of Birth as per Christian era	(b) Age	(c) Gender (Tick ✓)	Men <input type="checkbox"/> Women <input type="checkbox"/> Transgender <input type="checkbox"/>	d) Aadhaar No :
4. Nationality	5. Religion			
6. a) Community (Tick ✓)	b) Caste		7. Mother Tongue	
OC <input type="checkbox"/> / BC <input type="checkbox"/> / MBC <input type="checkbox"/> / SC <input type="checkbox"/> / ST <input type="checkbox"/>				
8. Differently abled Candidates (Tick ✓) Yes <input type="checkbox"/> No <input type="checkbox"/>	9. Present Occupation			

10. Are you undergoing any other course in a College or University? If so, Specify	
11. The wards of Defence Personnel / Ex-Servicemen should specify as :	(a) Ward of Defence Service Personnel (b) Ward of Ex-Servicemen : Navy / Army / Air force.
12. Chosen by the Candidate will be final and will not be permitted to change subsequently	a) Project Work <input type="checkbox"/> b) Two Optional Subjects <input type="checkbox"/>

13. DETAILS OF EXAMINATION PASSED

Examinations passed with Subjects	Name of the		Month & Year of Passing	Registration Number	Class with Grade/Marks	Maximum Marks
	School / College	Board / University				
<b>S.S.L.C. / 10<sup>th</sup> Std.</b> Strikeout whichever is not applicable (State whether it is 10 Years or 11 Years Course)						
<b>P.U.C. / Higher Secondary</b> Strikeout whichever is not applicable (State Whether it is One Year or Two Years Course)						
<b>BA/BSC/BCom Degree</b> With main Subject Strikeout whichever is not applicable (State Whether it is Two Years or Three Years Course)						

(The above statement must be attested by the same Gazetted Officer/Assistant Registrar/  
Public Relation Officer (IDE) / Faculty who attested the Photograph)

14. Enclosures

- (1) ..... (3) ..... (5) .....  
(2) ..... (4) ..... (6) .....

I hereby declare that all the particulars given above are correct and I agree to abide by all the Rules and Regulations of the University that are in force from time to time.

Station :

Date :

SIGNATURE OF THE APPLICANT

**FOR OFFICE USE ONLY**

The Admission particulars furnished in the column No. 13 have been duly verified with Originals and the Candidate is eligible for admission

VERIFYING STAFF

1. Admission / Cancellation Intimation sent on .....

2. Certificates returned to the Candidate on .....

- (1) Statement of Marks (2) S.S.L.C Book (3) Conduct Certificate  
(4) Birth Certificate (5) Transfer Certificate (6) .....

ASST. /ASST. SECTION OFFICER

SECTION OFFICER

ASSISTANT REGISTRAR

STUDY CENTRE / SPOT ADMISSION CENTRE / PARTICIPATORY INSTITUTIONS / TWINNING PROGRAMME CENTRE / OFFICE

Signature of the Centre Co-ordinator with Seal

DIRECTOR

Received the Provisional admission intimation and all the original certificates submitted by me

SIGNATURE OF THE APPLICANT  
WITH DATE





# ADDRESS SLIP

**M.B.A., General, Integrated, Executive**  
M .C.A. , M .Sc.(I.T.) **COURSES**  
**Academic Year 2017 - 2018**

**Affix**  
**Passport Size**  
**Photo**

*Not to be attested*

A	1	7											
---	---	---	--	--	--	--	--	--	--	--	--	--	--

**Calendar Year 2018**

C	1	8											
---	---	---	--	--	--	--	--	--	--	--	--	--	--

To be filled in by the applicant (6 copies of his/her address) and returned with the completed application form

Please note that the admission intimation, original certificates and learning materials will be sent only to this address by Postal Service

**USE BALL POINT PEN ONLY. WRITE IN CAPITAL LETTERS**

Name : .....

.....

Address : .....

.....

.....

.Mob.No.....

PIN

--	--	--	--	--	--

Name : .....

.....

Address : .....

.....

.....

.Mob.No.....

PIN

--	--	--	--	--	--

Name : .....

.....

Address : .....

.....

.....

.Mob.No.....

PIN

--	--	--	--	--	--

Name : .....

.....

Address : .....

.....

.....

.Mob.No.....

PIN

--	--	--	--	--	--

Name : .....

.....

Address : .....

.....

.....

.Mob.No.....

PIN

--	--	--	--	--	--

Name : .....

.....

Address : .....

.....

.....

.Mob.No.....

PIN

--	--	--	--	--	--