



Bharatiya Vidya Bhavan's

Usha & Lakshmi Mittal Institute of Management

Copernicus Lane
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New Delhi - 110 001

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Registration Form

**2-Year Full Time Post Graduate Diploma in Management (PGDM)
[Approved by AICTE]**

FORM NO.

Exam Undertaken (CMAT/MAT/CAT/ATMA/XAT): _____

Score: Composite/Percentile: _____

APPLICANT'S PERSONAL DETAILS:

(All details are mandatory. Please Fill in Capital Letters.)

First Name: _____ Middle Name: _____ Last Name: _____

Date of Birth (dd/mm/yyyy): ____/____/____ Category (SC/ST/BC/OBC/EWS/GEN/PH): _____

If Admitted Under TFW: _____

Sex (Male/Female): _____ Nationality: _____ Religion: _____

Telephone: (M) _____ (Res.) _____ Email: _____

Father's Name: _____ Occupation: _____

Telephone: (M) _____ (Res.) _____ Email: _____

Mother's Name: _____ Occupation: _____

Telephone: (M) _____ (Res.) _____ Email: _____

ADDRESS FOR COMMUNICATION:

_____ City: _____ State: _____ Pin code _____

PERMANENT ADDRESS:

_____ City: _____ State: _____ Pin code _____

ACADEMICS:

Qualification	Name of the Institution	University/ Board	Main Subjects	Year	Cumulative % of Marks
Class X					
Class XII					
Graduation					
Post Graduation					
Any Other					

EXTRA CURRICULAR ACTIVITIES:

S.No.	Nature of Activities	School Level	University Level	National Level

EMPLOYMENT DETAILS:

S.No.	Organization	Designation	Salary	Email/Phone of HR at the Organization

How did you come to know about BULMIM?

- Word of Mouth Alumni MAT Bulletin
 Call from BULMIM Internet (website) Newspaper (Name):
 Coaching Center (Name)
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DECLARATION:

I hereby certify that the information provided in the Registration Form is complete, accurate and true to the best of my knowledge and belief. I have carefully read the contents of the prospectus together with Enclosures /inserts and agree to all the terms and conditions mentioned therein. If admitted, I agree to abide by the rules and regulations of **BULMIM** as may be enforced from time to time. In case any of the information found to be incorrect, false or misrepresented, I may be expelled or/and my candidature may be cancelled from the institute at my cost and expenses.

Place:

Name:

Date:

Signature:

ENCLOSURES:

1. Copy of Score Card of CAT/MAT/XAT/CMAT/ATMA
2. Copies of marks sheet & certificates of 10th, 12th and Graduation
3. Two recent passport size photos
4. Sponsorship (if any) of the employer
5. A payment of Rs.1100 by either of the following ways: (out of a, b or c)
 - a. DD/Pay order in favor of BULMIM payable at New Delhi
 - b. Online transfer (NEFT/RTGS) to UCO Bank, K. G. Marg, New Delhi,
(IFSD Code: UCBA 0002036 and Account No. 20360110001509)

In case of NEFT/RTGS transfer, provide the following details:

Name of the Account Holder: _____

Account Number: _____

Bank Name: _____

Transaction Date: _____

Transaction – id: _____

FOR OFFICIAL PURPOSE :

RECEIPT NO:

Received & Checked By:

Remarks: