



Shiksha-Dhiksha Institute of Management

(Run & Managed by Shiksha-Dhiksha Society)

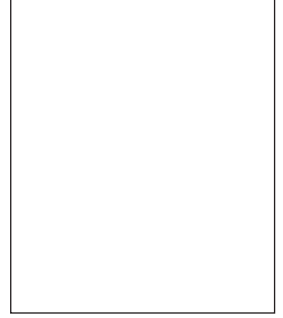
APPLICATION FORM

(fill in block letters)

To
Co-ordinator
Shiksha-Dhiksha Institute of Management
Jaipur Centre

Sir,

I request you to enroll me as a Student of your institute. My details are as mentioned below.



Course applied for _____

Name _____ Gender : M / F

Date of Birth _____ Age (as on 1.7.20) _____ Yrs _____ Month, Married : Yes / No

Religion _____ Caste _____ Subcaste _____ BPL : Yes / No

Year of Passing 10th std _____ Total Marks _____ Obtained _____ % _____

Board _____ Medium : Hindi / English

Year of Passing 12th std _____ Total Marks _____ Obtained _____ % _____

Board _____ Medium : Hindi / English

Under graduation study _____

Other courses undertaken _____

Father's Name, Occupation _____

Mother's Name, Occupation _____

Permanent Address _____

_____ Vill / Town _____

Post _____ Tehsil _____

District _____ State _____ Pin _____

Correspondence Address _____

_____ Vill / Town _____

Post _____ Tehsil _____

District _____ State _____ Pin _____

Landline Tel _____ E-mail _____

Own Mobile _____ Parent's Mobile _____

Health history (mention all medical treatments that lasted more than 15 days)

_____ Blood Group _____

Name, address & contact nos. of two references (other than one's nuclear family) who can take responsibility for your behavior.

1) _____

2) _____

To be read & signed by the Student & his/her Father or Guardian.

1. The entires made in the application form are correct and no alterations of any kind shall be hereafter asked for. If information given is found false, my admission will stand cancelled & I will not ask any refund of fees paid.
2. I have thoroughly read & understood the Rules & Regulations of the Institute as mentioned in the prospectus and shall abide by the them. Ignorance of the same will not be an excuse.
3. I shall not claim any sort of refund from the Institute paid by me on account of Admission fee, Identity card & Syllabus charges, Postal Charges, Tuition Fee, Examination Fee etc. under any circum stances.
4. I promise to pay entire fee even if I leave the course opted by me before its completion.
5. All disputes will be subject to Bhilwara, Rajasthan Jurisdiction only. The Institute's management has the right to strike off my name, forfeit the fees paid & take disciplinary action if I contravene any of the rules & regulations of the Institute.

Date : _____

Place : _____

Applicant's Parent

Applicant

Enclosed Documents (photocopies attested by gazetted officer - 3sets)

- 10th Marksheet
- 12th Marksheet
- Caste Certificate
- Mool Nivas Certificate

FOR OFFICE USE ONLY

Name of Candidate _____

Course Allotted _____

Registration No. _____ Date of Joining _____

Course completed ? Yes / No. _____ Date of Leaving _____

