

IPMS

(Institute of Professional & Management Studies) 2/15 Arya Nagar, Mansarovar Colony, Ramghat Road, Aligarh

Phone No.: 94121-75550, 98378-77879

Affix recent Photograph

Serial No.....

ADMISSION FORM

(To be filled in CAPITAL letters by the applicants/parents/or guardian)

		COURSE:	
Name of Candidate	:		
Father's Name	:		
Mother's Name	:		
Date of Birth	:		
Aadhar No.	:		WW. C. A.
Address (Permanent)	:		
*	33750		
Address (Correspondence)	:		
Contact Details	:	Mob, What	
		Mother, Fath	er
E-mail ID (Compulsory)	:		
Annual Income (Parents)	:	(In Lak	ths), Catagory: General / OBC/SC/ST
Last School attended	:		
		ClassyearMed	lium:Stream
Registration No.	:		(with ICAI/ICSI/ICMAI)
		Declaration:	
		ion given above are true & correct to the best ourse as per the rules of institutions.	t of my knowledge & belief and give my/
Date : Please Enclose the following documents :		(Signature on Parent)	(Signature of Candidate)
Copy of statement of marks. Copy of ICAI/ICSI/ICMAI Registration		2. Copy of Aadhar Card stration 5. Photo (Passport Size)	3. Copy of Date of birth
		OFFICE USE	
Fee Installments: (1) Rs		.DtDtDt	(3) RsDt
Remark (if any):			