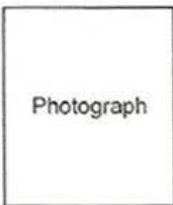




**INSTITUTE OF STRATEGIC BUSINESS MANAGEMENT (ISBM)**  
(affiliated to Dibrugarh University)

Address: Institute of Strategic Business Management (ISBM), Bldg. No. 53, Bhuban Road,  
Near Hotel Bluemoon & Govt. Girls High school, Uzanbazar, Guwahati -781001.  
www.isbm-g.com. Phone Number : 0361 2134121, 98640 79580, 99542 90374



Form No.

**(Application Form)**

SESSION : 2011-2012

**COURSE APPLIED FOR : Master of Business Administration ( 2 year full time MBA, 3 year full time BBA , 3 year full time BCA)**

1. Name of the applicant  
(in block letters)

2. Father's/Mother's/Husband's  
Name (in block letters)

3. Permanent Address :

4. Correspondence Address:

5. Nationality :

6. Date of birth :

7. Community ( put tick ✓ ) General  OBC  SC  ST

8. Name of the Institute last attended

9. Academic Qualification :

Exam Passed	Year	Class/ Division	Total Marks	% of Marks	Medium of Study	University/Board
Graduation						
Higher Secondary (12 <sup>th</sup> )						
H.S.L.C (10 <sup>th</sup> )						
Others—						

10. Work Experience

Organization	Period of Time	Designation

## DECLARATION

I do hereby declare that all the particulars furnished by me in the application are correct and true in all respects. I am liable for cancellation of my admission if any information provided in this Application Form is found to be false and incorrect. I further declare that I will abide by all the rules and regulations and orders of ISBM during my period of undergoing the programme and I will be liable for any damage caused by me to any property in any form of the Institute.

I also declare that I will obey the Rules and Regulations prescribed by the University so as to make me eligible for the award of Degree by the University. Further I declare that while a student of the Programme will not pursue any other course of study or hold any Part time / Full time employment elsewhere.

**Date:**

**Signature of the applicant**

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I do hereby authenticate the above statements made by my son / daughter / wife to be true. I undertake to extend the full financial support to him/ her required for the whole course of study. I also undertake that I will be responsible for the liability created by him/ her if any.

**Date:**

**Signature of the applicant**

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### The following Documents are to be submitted

1. A Character certificate obtained from the Head of the Institute / College last attended.
2. Attested Photocopies of Mark sheet/ Certificates of HSLC/HS/ Graduation
3. Two Passport size Photographs, one should be pasted on the space specified in the form.
4. SC/ST/OBC Certificate (if applicable) from appropriate Authority.
5. Gap certificate (if applicable).

N.B. All original testimonials must be produced at the time of Personal Assessment Test.

Completed Application Form with relevant documents must reach the office of the institute on or before the notified date.

Selected for Admission to 1<sup>st</sup> SI Semester..... Course, 200.....  
(Vide SL. NO..... of the selection List dated.....)

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**May be admitted**

Date.....

Admission Co-ordinator.....

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**ADMIT**

Director

Date.....

Date.....

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Fees Received Rs ..... Vide receipt No .....

Date.....

Cash Collector