FORM No.

SURNAME



INDIAN INSTITUTE OF SOCIAL WELFARE AND BUSINESS MANAGEMENT

MANAGEMENT HOUSE, COLLEGE SQUARE WEST, KOLKATA - 700 073

EXECUTIVE PG PROGRAMME IN MANAGEMENT (2024-2025)

MIDDLE NAME

FIRST NAME

1.

Name: Mr./Mrs./Miss_ (IN CAPITAL LETTERS)

2.	Father's / Husband's Name :								
3.	Mother's Name :								
4.	Guardian's Phone Number :						Affix a		
5.	Date of Birth :							recent Photograph	
6.	Gender : Male Female Third gender								
7.	Nationality:								
8.	Religion :								
9.	Catagory: General / NC-OBC / Scheduled Caste / Scheduled Tribe								
10.	Physically Challanged: YES / NO								
10(a) If Yes Disab	ility Percentag	e:						
11.	Blood Group	:							
12.	12. BPL: YES / NO								
12(a	12(a) If yes Annual Family Income Rs								
13.	Address : _								
	Mobile No								
		E-mail :							
14.	14. Academic Qualification: (Chronologically starting from 10th standard Examination)								
Ex	xamination		Jniversity chool/College)	Year	Main Subject (Specify Honours)	Marks Obtained/ Total Marks	CGPA or DGPA	% of Marks	Class/ Div.

15.	Other	Qualification,	if	any	/
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16. Details of Job Experience, if any (attach extra sheet if necessary)

Organisation	Designation	Department	Salary	Period of Service	

17.	Present Employment					
	Organisation					
	Designation —					
	Years					
18.	Any Scholarship / Stipend :					
19.	Extra Curricular Activities :					
20.	(a) Fees Paid Rs.	_ (b) Date of Payment	(c) Mode of Payment : Cash / Online / Powerjyoti			
	completed application form s					
reception of the Institute by 15th January, 2024.			Signature of the Applicant			
Date	:					

List of Documents to be attached :

1. Class X, XII Marksheet

Place:

- 2. Bachelor's and Master's degree certificate and Marksheet (For final year candidates, provide all marksheets till last year /
- 3. Proof of Date of Birth (Birth Certificate or Aadhhar Card or Class X Admit Card or Passport)
 4. Certificate for SC/ST/NC-OBC, if applicable
 5. Certificate for Physical Disability, if applicable
 6. Certificate for Below Poverty Line, if applicable