TECNIA INSTITUTE OF ADVANCED STUDIES- CDL

Centre for Distance Learning Approved by UGC-DEB & AICTE

APPLICATION FORM

FOR ADMISSION TO POST GRADUATE DIPLOMA IN MANAGEMENT PROGRAM

Form No. _____

<u>Ge</u>	ne	ral	<u>Ins</u>	<u>tru</u>	<u>cti</u>	<u>ons</u>	<u>s:</u>																															
•	 Write in English CAPITALS or Numerals only. Use only blue/black ball point pen, use of green/red pen, gel pen or pencil is not allowed. Write one character in one box. Do not write outside the boxes. 												Paste your Latest Passport Size																									
	Enrolment No: Affix enrolment No. label (For office use only)														Photograph duly attested by you.																							
1.	Na	Name :													<u> </u>		аріс —	e) 																				
2.	Fe	e C	Det	ails	3 :																																	
	Ar	Amount in Rs, In Words: Rs										_																										
	Oı	Online Payment Transaction NoPayment Date//										_																										
	De	epc	sit	or'	s B	ank	κN	am	e &	Br	an	ch_																						_				
3.	Pr	og	ran	n C	od	e: _																																
4.	Na	ame	e of	fth	e S	tuc	den	t:																														
5.	Fa	ithe	er's	s/H	usb	oan	d's	Na	ame	e (d	o n	ot p	ore	efix	:. S	hri	/ N	<u>lr./l</u>	Dr.	et	:c)													_				
																		<u> </u>	<u> </u>		<u> </u>	<u> </u>									L	<u>L</u>	<u>L</u>	Ļ	느	Ļ	<u> </u>	_
																															<u> </u>	<u></u>		L				
6.						orr r's				nce	e: F	lou	se	/Fla	at/E	Buil	ldi	ng	No	. S	itre	ee	t/L	oca	atio	n/	Vill	ag	e ([Οo	no	t re	эрe	at	t yo	ur		
																																		T		T		٦
						1		1	1						1			1		!							<u> </u>			l								
Cit	y:													Dis	stri	ct:	Ī															T	1					
													S	tat	e:		_			PI	N	CC	OD	E:									_					
Mc	bild	e N	Ο.														E	Ema	ail:							I]		
7.	G	enc	ler:	(T	ick	the	e a _l	ppr	op	riat	e b	ox.)					8.	Na	itic	ona	alit	ty:					In	dia	n	Ot	her	rs:	ļ				
	M	ale					F	em	nale	<u>,</u> [

9.	Date of Birth: (DD/MM/YYYY)
10.	Category:
10.	General SC ST OBC
11.	Whether Physically Handicapped: (Tick if applicable)
12.	Terrirory:
	Urban Rural Tribal Kashmiri Migrants
13.	Social Status:
	Ex. Servicman War-Widow Not Applicable
14.	Religion:
	Hindu Muslim Sikh Christian Jain Buddhist
	Parsi Jew Others
15.	Employment Status:
	Working Not Working TIAS regular employee TIAS-CDL employee
16.	Qualifying Exam details (GraduationLevel)
	Qualifying Exam Year of Passing % of Marks
17.	Work Experience, if any.
	Years Months
18.	Employed in:
	Govt. Sector/PSU Pvt. Sector Self Employed
19.	Annual Income:
	Upto Rs. 2 Lacs Between Rs. 2-3 Lacs Rs. 3- 5 Lacs Above Rs. 5 Lacs
20.	Declaration by Applicant:
	I hereby declare that I have read and understood the conditions of eligibility for the program for which I seek admission. I fulfill the minimum eligibility criteria and have provided necessary information in this regard. In the event of any information being found incorrect or misleading, my candidature shall be liable for cancellation by the TIAS-CDL and I accept them and shall not raise any dispute in future over the same.
	Date