INDIAN SCHOOL OF MANAGEMENT AND STUDIES

APPLICATION FORM



Name –

Course -

Counselor Name -

DOB –

Gender – Male / Female

Correspondence Address –

Permanent Address -

Contact No -

Email_id-

Education Qualification -

Sr.No	Std	Board/ University	Grade/ Percentage

Work Experience -

Sr.No	Duration	Company Name	Designation

Payment Details - Cash -

Cheque Details -

Online Transfer –

Exam Mode - 1) Home option

2) Online Mode

3) Study Center

I have understood the Course Aspect and Norms. I assure to abide by the conditions and Standards of the Institute. I am aware that if I am found violating any conditions then my admission may be cancelled and I will be wholly responsible for it.

Date :-

Signature-