



**VPM'S DR. V. N. BEDEKAR INSTITUTE OF MANAGEMENT STUDIES, THANE
(DR VN BRIMS)**

ISO 9001:2008 Certified Institute by LRQA
Building No. 4, Jnanadweepa, Chendani Bunder Road,
Thane (W) - 400601, Phone No.: 022-25364492 / 25446554 (FAX)

MASTERS IN MANAGEMENT STUDIES (MMS)
APPLICATION FORM FOR INSTITUTE LEVEL SEAT

Form No.: _____ **Date** _____

To

The Chairman,

VPM's Dr. V.N. Bedekar Institute of Management Studies

Dear Sir,

I, undersigned Mr. /Ms. _____, hereby submit application for "Institute Level Seat" admission for Two Years Full Time Masters in Management Studies course, VPM` N. Bedekar Institute of Management Studies, Thane .

A] Personal Details

1. Name of the Candidate: Mr./Ms. _____
(Surname First Name Middle Name)

Parent's Name:

Postal Address:

.....**Pin code:**.....

Contact Nos.: Mob.: **Landline:**.....

Alternate Contact No.: **Email:**

B] Academic Performance:

Qualification	Board / University	Year of Passing	Marks Secured	Total Marks	Percentage (%)	Grade	Remarks
S.S.C./ I.C.S.E/ C.B.S.E.							
H.S.C./ I.S.C.							
B.A./ B.Com/ B.Sc./ B.M.S./ B.E/ B. Pharm./ (Any other , please specify)							
Post Graduation (If any)							
Any Other							

D] Details of MH-CET/ CAT/ MAT/ XAT/ ATMA/CMAT

- a) MH-CET/ CAT/ MAT/ XAT/ ATMA/ CMAT Roll No.: _____
b) I. D. No.: _____
c) University Gen Merit No.: _____
d) Score Obtained: _____ Out of _____ Percentile : _____ %

E] Declaration

I hereby certify that the information provided by me in the application form for admission is complete and accurate.

I also agree that the Institute has the right to cancel my admission, if at any point of time the Institute finds that the information provided by me in the application form for admission is incorrect and /or misleading and /or if I fail to produce necessary documents at the time of

admission. Thanking you.

Yours faithfully,

Date :

Student's Signature

Name of Student

()

Attachment : I am attaching my photocopies of the score card/s graduation examination for your ready reference and records.



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**MASTERS IN MANAGEMENT STUDIES (MMS)
APPLICATION FORM FOR INSTITUTE LEVEL SEAT**

For Academic Year

Form No.: _____

(Acknowledgment –Student Copy)

Received with thanks an Application Form from Mr./Ms. _____

on date _____ at _____ a.m. / p.m.

Dated Signature of Administrative In-charge:

Name of Administrative In-charge:

College Seal: