



SRI SUKHMANI INSTITUTE OF MANAGEMENT

New Delhi

Post Graduate Diploma in Management (PGDM)

(Approved by AICTE, Two years full time 2011-13)

ADMISSION FORM

To be filled by Applicant

Name	
Father's Name	
Father's Occupation	

DD MM YY

Male Female Age in Years Date of Birth

Address For Correspondence:	Mobile:
	Tel:
Permanent Address:	E-Mail:

Educational Qualifications (10th Onwards)

S No.	Qualification	Board/University	Years of Passing	% of Marks

Work Experience if any: (Starting with your present/last work)

S No.	Post Held	Organization	From	To	Job Profile

I undertake to declare that upon my admission at SSIM, I would abide by the rules and regulations governing the conduct of the programme, and the information provided by me is true to the best of my knowledge and belief.

Date

Signature of the candidate