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No.

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A B-School offering MBA Programme

Approved by AICTE and Affiliated to Bharathiar University

Application Form for admission to the 2-year full time MBA Programme 2024- '26(29th Batch)

Affix a Passport sizePhotograph

Applicant's Full Name		
(IN BLOCK LETTERS) ——		
Date of Birth	(DD/MM/YY) AgeYears	Gender: M F
Nationality		
Religion	Cast	re
Whether belongs to SC	ST OBC MBC	OTHERS
(Tick whichever is applicable)		
Blood Group :		
Whether physically handicappe	ed Yes No	
Permanent Address		
	Pin code	
E-mail		
Address for Communication		
Telephone NO	Mobile:	
Aadhar No :		
Name of Father / Guardian		
Occupation of Father / Guardia	an Family Income:	
Official Address of Father /Gu	ardian	
		Pin code
Mobile:	E-mail	

Educational Qualification

	Course	Institution	University	Aggregate marks and Percentage	Grade / Class	Period of Study	Year of Passing
10th							
+2 / H.Sc.							
UG							
PG							

Name of the Test	CAT	CMAT	MAT	TANCET	CE
-					
		DECLA	RATION		
hereby certify that the ules of the Institution,		n this application are t	rue to the best of m	ny knowledge and belie	ef. I will ab
am attaching DD No.		Da	ted	for Rs	
rawn on			Bank ,		Branch.
				Signature :	:
ate:					
Date:					
Date :		FOR OFFIC	EE USE ONLY		
	nce Test:				
Score obtained in Entra		Score	obtained in GD		
Score obtained in Entra Score obtained in Perso	nal Interview:	Score	obtained in GDTotal Score:		
	nal Interview:	Score	obtained in GDTotal Score:		

Director / Principal