

# MANAGEMENT EDUCATION & RESEARCH INSTITUTE

53-54, INSTITUTIONAL AREA, (OPP. D-BLOCK), JANAK PURI, NEW DELHI-110058

Approved by AICTE, Ministry of HRD, Govt. of India & Affiliated to GGS Indraprastha University)

## An ISO 9001:2015 Certified Institution Application Form

(PLEASE FILL THE FORM IN BLOCK LETTERS)

### 1. COURSE DETAILS:

Course Title: \_\_\_\_\_

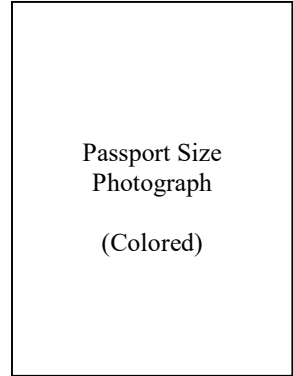
Proposed date of start: \_\_\_\_\_

Proposed level of entry : Year 1  Year 2

Semester I  II  III  IV  V

Category Indian  Exchange  Overseas

Sponsoring Institute : \_\_\_\_\_



### 2. PERSONAL DETAILS:

Title: Mr/Ms/Miss/Mrs.etc. Gender : Male  Female

DATE OF BIRTH (in Christian era)

Day Month Year

First Name : \_\_\_\_\_

Maiden or any other name that you have been known by : \_\_\_\_\_

Surname / Family name : \_\_\_\_\_

Permanent Address : \_\_\_\_\_

\_\_\_\_\_ Post Code: \_\_\_\_\_

Correspondence Address: (If different) \_\_\_\_\_

\_\_\_\_\_ Post Code: \_\_\_\_\_

Telephone no: \_\_\_\_\_ Mobile no. \_\_\_\_\_

E-mail address: \_\_\_\_\_

Nationality: \_\_\_\_\_

Do you hold valid passport:      Yes          No   

If yes, Passport no. \_\_\_\_\_

**3. ACADEMIC AND PROFESSIONAL QUALIFICATIONS:**

Applicant should list all subjects taken ,whatever is the result, in reverse chronological order i.e. last first. Continue on the separate sheet if necessary

<b>Qualification eg Secondary, sr. secondary, Degree,Post graduate, Masters etc.</b>	<b>Subjects</b>	<b>Year – From ... to year</b>	<b>Place of study</b>	<b>Result (grade or band)</b>
Secondary School				
Sr. Secondary/ Bac				
BAC +3				
M 1				
M 2				
Any Other				

Please attach a separate sheet for subjects studied at BAC + 3, M1 and M2

If you are overseas student please include your IELTS/ TOFEL results below:

IELTS overall band score          TOFEL SCORE   

The institute also accept other approved qualifications equivalent to the IELTS and TOFEL test scores .

**4. EMPLOYMENT AND WORK EXPERIENCE :**

Please give details of work experience, training and employment in reverse chronological order:

Nature of work / Training	Name of Organization	Full time or part time	From (Month and year)	To (Month and Year)

**5. CRIMINAL / CONVICTIONS:**

The Institute has a duty to ensure safety and security of its students and staff. Please tick box whichever statement applies to you:

I have no criminal record	
I have a criminal case pending in the court	
I have a relevant criminal conviction that is not spent	

**6. REFEREE(S)**

Name and Address of Referee(s)

1. Academic	2. Industrial / other
Name	Name
Address	Address
Post Code:	Post Code:
Telephone Fax:	Telephone Fax:
E-mail:	E-mail:



**8. Person to be contacted in case of emergency:**

Name : \_\_\_\_\_

Tel. No. \_\_\_\_\_ E mail: \_\_\_\_\_

**Declaration:**

I confirm that the information given above is true to the best of my knowledge and belief and that none of the information requested or other material information has been omitted. I accept that if it is discovered that I have supplied false, inaccurate or misleading information MERI reserves the right to cancel my application, withdraw its offer of a place or terminate attendance at the institute . I shall have no claim against MERI in relation thereto.

Applicants Name:

Applicants Signature :

Date:

\_\_\_\_\_

**FOR OFFICE USE ONLY**

**Recommendation of the forwarding college/ University :**

GD/ Interview held on \_\_\_\_\_

**Recommendation of Interview Board**

(a) Admit to \_\_\_\_\_ Programme.

(b) Waiting list \_\_\_\_\_

(c) Rejected \_\_\_\_\_

Date \_\_\_\_\_

Signature of Authorized Signatory