#### NATIONAL INSTITUTE OF TECHNOLOGY KARNATAKA, SURATHKAL **MANGALORE-575 025**



Annual Income

Registration No. (for office use only)

#### Application for Admission to M.B.A. (Master of Business Administration) **Programme 2017-19**

		ransaction ID:		
		Date of Transaction		
		Rs Category: O		
Ins	structions:	Γ		
1.	Fill in the application form and write address in the	he address slots and Registration memo		
2.	Enclose self-attested photo copies of marks card a	and other documents.		
3.	Candidates who are appearing for the Final Bachelor's Degree Examination of May/  June 2017 may also apply provided they can produce proof of their eligibility  for admission at the time of interview.  Affix attested recent Passport size photo			
4.	Late/incomplete applications and applications without fee payment are liable to be rejected.			
5.	Last date for receiving filled in application is 10.0			
	Name of the Candidate in full (in Block Le as mentioned in the Degree Certificate):	etters		
	2. Address of the applicant (with pin code):	Permanent :	•	
	For Correspondence:			
		Telephone with STD Code : Mobile No. :		
		email:		
	3. Name and address of Father/Mother (or Guardiff the parents are not alive, state relationship of Guardian)		•	
	4. Occupation of Father/Mother/Guardian			
	Annual Income			

5. a. Religion of the Candidate:						
Caste/Subcaste  b. Do you belong to Scheduled Caste/Tribe/OF (If yes, enclose a copy of the Caste Certifica competent Revenue Authority)				Yes / No SC / ST / OBC		
c. Place	of domicile:					
d. Nati	onality:					
		Physically Challenged by of a medical certif		Yes / Medical Officer)	No	
6. Date	of Birth (Copy	of the Supporting d	ocument to be enclo	sed)		
In Fi	gures: Day	Month	Year			
In W	ords:					
a. i. (		mination Passed:		n/B.A./ B.Com./ I specify	BCA/ B.Sc./B.I	3.M./if any other
	nstitute where		_			
	eriod of study:		From		_ to	
	Jniversity	:				
b. Mark	s obtained in th	ne Qualifying Exami 	nation (Bachelor's L	Degree):		
		Year of Passing	Marks obtained	Max. Marks	Percentage	Class/ Division
I Year	I Sem.					
	II Sem.					
II Year	III Sem.					
11 1001	IV Sem.					
III Year	V Sem.					
III Tear	VI Sem.					
IV Year	VII Sem.					
	VIII Sem.					
Aggregate	percentage of r	marks (all semesters/	years)/CGPA			
8. CAT-2016: Score Percentile						
(Enclose	a Copy of the	CAT-2016 Score Ca	ard)			
9. GMAT-2016: Score Percentile						
(Enclose	a Copy of the	GMAT-2016 Score	Card)			
10. CAT-2	:016/GMAT -2	016 Hall Ticket/ Adı	mit Card/Test Regis	tration No		

	. Duration e employer	of Work Experience: Your	ears and months	(Enclose a certificate from			
	Sl. No.	Name of the Organisation	<u>Designation</u>	Number of years and months			
12	. Clearly s <sub>l</sub>	pecify your choice of Place of MBA Se	lection Process NITK, Surat	hkal			
	New Delhi						
rec	Candidates may please note that they need to be careful in choosing their centres. We shall not entertain requests for change of centres after the application is sent. If the candidates does not choose from the above centres, NITK, Surathkal would be considered as the centre for selection process.						
		<b>DECLARATION</b>	N OF CANDIDATE				
	I hereby de	clare that to the best of my knowledge, the	particulars furnished in this ap	oplication are correct.			
	I am willin	g to forfeit the seat secured for the course,	if any information provided by	me is false.			
	If selected for admission, I promise to abide by the condition of admission and Rules of the Institute, and the Academic Regulations that govern the programme of study/ research.						
Pla	ice:						
Da				Signature of candidate			
				Signature of Camerame			
	cuments (s	self-attested photo copies) to be enclosed on.	(original to be submitted at	the time of admission) with			
1.	Copy of the	e Marks Card of Qualifying Exam (all years / a	ll semesters)				
2.	Photo copy	of Hall ticket/Admit Card CAT- 2016/GMAT	-2016.				
3.	Copy of the CAT/GMAT 2016 Score Card.						
4.	S.S.L.C./ X	Std. Marks Card (for Date of Birth).					
5.	Certificate by employer ascertaining the duration of Work Experience.						
6.	Caste Certi	ficate issued by competent authority for SC/ST	VOBC.				
7.	OBC certif	icate as per Central Government format issued	by competent authority, if applica	ıble.			
8.	Persons wi	th Disabilities (PWD) certificate, if applicable.					
9.	Course con	npletion certificate from the College(if qualifyi	ng degree exam result are awaited	1)			

## **CERTIFICATE**

### To be submitted by final year Bachelor's Degree students who are yet to complete the Qualifying examination

This is to certify that the applicant (name).	
is a bonafide student of this institution ( nar	me)
studying in final year BE/B.Tech/B.A./ B.Co.	m. / BCA/ B.Sc./B.B.M./if any other specify
during the academic year	
Seal of the Institution	Signature
Date:	Head of the Institution/ Principal

#### NATIONAL INSTITUTE OF TECHNOLOGY KARNATAKA

#### SURATHKAL, MANGALORE- 575025, KARNATAKA STATE.

#### **REGISTRATION MEMO.**

		Date:	2017
Re	ef: Application for admission to M.B.A. Pr	ogramme 2017-19	
The Registration Number correspondences connected with y unless it bears your Registration N	assigned to your application for admission your application. No notice will be taken fumber.	on is noted below, which must be quote of any communication or document sent	d in all by you
Registration Number:			
M.B.A/2017-2019		Asst. Registrar (Academic)	
		Affix Stamp	
		Rs.6/-	
	l		
	To:		
The Asst. Registrar (Academic),	Mr./Ms.		
N.I.T.K., Surathkal			

**MANGALORE - 575 025.** 

# 

Pin Code \_\_\_\_\_(\_\_\_State)

(Write address of the candidate)

Pin Code \_\_\_\_\_(\_\_\_State)

# APPLICATION FOR M.B.A. ADMISSION 2017-19

#### BY REGISTERED POST

From:	То:
	The Asst. Registrar (Academic),
	N.I.T.K., Surathkal
	<b>MANGALORE - 575 025</b>
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