



IILM Academy of Higher Learning

1, Viraj Khand, Gomti Nagar, Near Dr. Hahnemann Crossing, Lucknow-226010.

Phone : 0522-2727292-293, Fax : 0522-2727291

Web : www.iilmko.ac.in E-mail : adm@iilmko.ac.in

APPLICATION FORM FOR ADMISSION TO PGDM (2012-2014)

1. **Name** _____

(IN BLOCK LETTERS)

First

Middle

Last

Date of Birth : (Date) _____ (Month) _____ (Year) _____ Sex : M / F

2. **Family Background :**

Name of Father _____

Name of Mother _____

Profession : Business ☐ Pvt. Service ☐
(Please tick) Govt. Service ☐ Others ☐

Profession : Business ☐ Service ☐
(Please tick) House wife ☐ Others ☐

Organisation _____

Organisation _____

Contact No. _____

Contact No. _____

Please affix
your
photograph
here

3. **Annual Family Income (Gross) : ₹** _____

4. **Address of the Candidate (To be Filled in Block Letters)**

(i) Permanent : _____

_____ Pin Code _____

(ii) Correspondence : _____

_____ Pin Code _____

(iii) Contact Details : Mobile _____ Tel. No. with STD Code _____

E-mail ID _____

5. **Qualifying Examination Details :**

Appeared in MAT / CAT / XAT / If any Other (Pl. Specify) _____

Test Regn No. _____ Test Date _____

Percentile / Composite Score _____

6. **Educational Qualifications : (only recognized courses)**

Particulars	Year of Passing	School / Institution	Board / University	Major Subjects	% of Marks
Std. X					
Std. XII					
Graduation					
Post Graduation					
Professional Course					
Others					

7. **Work Experience :** (In chronological order beginning with the most recent one and going backwards). *

Date From	Date To	Organization	Designation	Functional Responsibility

8. **Academic / Professional Accomplishments :** (Awards / Medals / Prizes / Scholarships / Certificates / Honours, etc.) *

Name of Award	Awarding Institution	Year

9. **Extra-curricular Activities :** (Extra curricular / community / cultural activities / sports & games. Indicate position or office held, if any) *

Activity	Position / Role	Year From	Year To	Remarks

10. **List any two of your strengths and weaknesses :***

Strengths : _____

Weaknesses : _____

11. **How did you get information about IILM-AHL, Lucknow? (Please tick)**

☐ News Paper (Pl. Specify) ☐ Website (Pl. Specify)

☐ Counsellor (Pl. Specify) ☐ Others (Pl. Specify).....

12. **Do you require hostel accommodation? (Please tick)**

☐ YES ☐ NO

13. **Declaration :**

I certify that the particulars given by me are true to the best of my knowledge and belief. If at any stage it is found that any information given by me is false or incorrect, my candidature may be cancelled.

Place : _____

Signature of the Candidate : _____

Date : _____

Note : Please ensure that Application Form is complete in all respects. Incomplete Application Form will be rejected.

The Application Form should be submitted to the Institute on or before the last date alongwith fee of ₹ 500/- in the form of Cash / Demand Draft drawn in favour of "**IILM Academy of Higher Learning**", payable at Lucknow.

*** Attach separate sheet(s), if necessary.**

Encl. : 1. Self Attested Copy of the Qualifying Exam Score Card (MAT / CAT / XAT / ATMA / JMET / Any Other)

2. Self attested Copies of Mark Sheets from High School to Graduation.