

MBA Evening Session (Approved by AICTE)
Vinoba Bhave University, Hazaribag
NAAC 'B++' Accredited University

REGISTRATION FORM

Name Dr./Mr./Mrs./Miss.

[illegible]

(First)

(Middle)

(Last)

Date of Birth

D	D
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M	M
---	---

Y	Y
---	---

Gender

M	F
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Marital Status

Single

Married

✓ Category

Gen

SC

ST	
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OBC	
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PH	
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NRI

EN

(Attach certificate, if applicable)

E-mail Address:-

Aadhaar No:-

[illegible]

Blood Group:-_____

Identification Mark:-

1. _____

2. _____

Correspondence Address

Mobile No. of Applicant -

Alternate Mobile .No-_____

Permanent Address

Telephone (with STD code)

(M) _____ Pin Code _____

Pin Code _____

Father's / Husband's Name: Mr. _____ Occupation _____

Occupation_____

Mother's Name Mrs. _____ Occupation _____

Mrs. _____ Occupation _____

Exam	Year of Passing	Board /University	School/College	Subject	% of Marks
Matric					
Intermediate/ 10 +2					
Graduation					
P.G.					
Others					
Others					

Note: Submit Photo copy of Self Attested Document/NOC of Employers.

Work Experience:-

SL.No	Name of Organization	Duration of Experience	From to	Post hold/holding
1				
2				
3				

Note: All the original certificate including the domicile certificate of the state will be verified at the time of counseling

DECLARATION: I hereby declare that the information given above or contained in the documents attached is complete and accurate. I understand that concealment or willful omission of facts will lead to cancellation of my admission or expulsion by University Department of Management, Vinoba Bhave University, Hazaribag.

Seal & Signature of Employer

(Candidate's Signature)

Examination Report (For Office Use Only)

Group Discussion /PI

Merit list

Date.....

Date.....

Conducted by GD/ PI Council

Conducted by Admission Council

Remarks.....

Verified Original Documents.....

Date of Birth Certificate ☐ Yes ☐ No.

Mark sheet ☐ 10th ☐ 12th ☐ Graduation

Qualifying Exam Result ☐ Yes ☐ No.

Transfer /Migration Certificate ☐ Yes ☐ No.

Work Experience Certificate ☐ Yes ☐ No.

NOC from Employer's ☐ Yes ☐ No.

Registration Details:

Batch CodePayment Type.....Net Fees.....

Signature of Verifier with date

Signature of Course Co-ordinator with date

Signature of the Director
University Department of Management
Vinoba Bhave University, Hazaribag