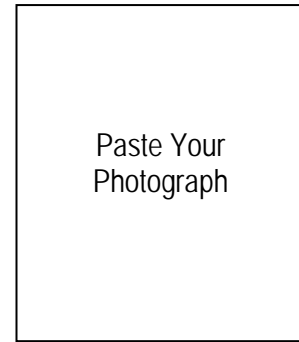


INSTITUTE OF PRODUCTIVITY & MANAGEMENT, MEERUT

ENROLMENT FORM

IPM Reg. No.: _____
 COURSE : _____
 SESSION : _____



1. Name (In Capital Letters) _____
2. Father's Name (In Capital Letters) _____
3. Mother's Name (In Capital Letters) _____
4. Permanent Address _____
 _____ Distt _____ State _____ PIN _____
 Phone (with STD Code) _____ Mobile No. _____
5. Address for Correspondence _____
 Distt. _____ State _____ PIN _____
 Phone (with STD Code) _____ Mobile No. _____ e-mail _____
6. Date of Birth _____
7. Age (as on 30th June) Year _____ Month _____ Days _____
8. Do you belong to: Scheduled Caste Scheduled Tribe Handicapped
 (If Yes, Attach certificate) Yes No Yes No Yes No

9. Educational Qualifications (From Matriculation onwards) Attach attested copies

Examination	Year	Board/University	Subjects	Div./Grade	%age
10th					
10+02					
Graduation					
Any Other					

(If there is some discontinuity or gap in the period of studies, give the reason)

10. Work Experience (if any) Attach Certificate (s)

Organization Name & Address	Designation	Period	
		From	To

P.T.O.

11. Name and Addresses 1. _____
Of Two References 2. _____
(other than Relative)

12. Have you ever been debarred/expelled from any institution? Yes No (If yes then give detail)

DECLARATION BY THE CANDIDATE

I hereby solemnly and sincerely declare that:

- (i) I have filled the application from myself. If it is discovered at any time even after confirmation of my provisional admission that have made a false or incorrect statement or concealed the facts, I shall be liable to disciplinary action and my name may be struck off from the rolls without prejudices to the Institution.
- (ii) Further, any changes in the Fees structure brought about as a result of any Order / Act of Government / Law / IPM will be acceptable to me from the date they are made applicable.
- (iii) I am not involved in any criminal case, nor is any criminal case pending against me in any court of law.
- (iv) I have carefully read the rules and regulations of the Institute, given in the prospectus and I shall strictly abide by them.

Date.....

Signature of the student

I assure that behaviour of my ward will remain good during the period of his studies in the Institute, otherwise his admission can be cancelled. The decision of the authorities of the Institute will be acceptable to me.

Date.....

Signature of the guardian

Details of the enclosures:

- | | |
|--|---|
| 1. Attested Photocopy of High School Certificate
Or any other Certificate stating Date of Birth | 4. Bank Draft No. _____ Date _____
Name of drawee Bank _____ |
| 2. Attested Photocopy of Graduation Marksheet/Degree | 5. |
| 3. Employment (Certificate(s)) (if any) | 6. |

Total_____

FOR OFFICE USE ONLY

Verified the entries and found correct **Admit**

VERIFICATION OFFICER

Received Rs.

Receipt No.

Reg. No. _____

ACCOUNTS OFFICER

DIRECTOR

Date