

APPLICATION FORM FOR ADMISSION

MASTER OF BUSINESS ADMINISTRATION (MBA) 2 YEARS FULLTIME
MASTER OF BUSINESS ADMINISTRATION (Integrated) 5 YEARS FULLTIME



RAJDHANI COLLEGE OF ENGG. AND MANAGEMENT

Approved by AICTE, Ministry of HRD, Govt of India, Affiliated to Biju Patnaik University of Technology
 Plot No. 18, Sector - A, Zone - B, Mancheswar Industrial Eastate, Bhubaneswar – 751010, Odisha
 Phone: 0674-2580831,2580832, E-mail : rcemodisha@gmail.com, rcemindia@rediffmail.com

Course Applied for

(FILL THE FORM IN BLOCK LETTER USING BALL PEN AND DO NOT OVERWRITE)

1.	Full Name:	<input type="text"/>	
		<input type="text"/>	
2.	Father's Name:	<input type="text"/>	
3.	Mother's Name:	<input type="text"/>	
4.	Date of Birth:	<input type="text"/> <input type="text"/> <input type="text"/>	5. Sex : Male <input type="checkbox"/> Female <input type="checkbox"/>
		dd mm yyyy	
6.	Aadhar Number Student:	<input type="text"/> <input type="text"/> <input type="text"/>	
7.	Correspondence Address:	<input type="text"/>	
		<input type="text"/>	
		<input type="text"/>	
	PO	<input type="text"/>	Dist. <input type="text"/>
	State	<input type="text"/>	Pin <input type="text"/>
	Tel	<input type="text"/> <input type="text"/>	Mob <input type="text"/>
		STD Code Tel.No.	Whatsapp <input type="text"/>
8.	Parmanent Address	<input type="text"/>	
		<input type="text"/>	
		<input type="text"/>	
	PO	<input type="text"/>	Dist. <input type="text"/>
	State	<input type="text"/>	Pin <input type="text"/>
	Tel	<input type="text"/> <input type="text"/>	Mob <input type="text"/>
		STD Code Tel.No.	
	Father	<input type="text"/>	Mother <input type="text"/>
9.	Student E-mail ID	<input type="text"/>	
10.	Married	Yes <input type="checkbox"/> No <input type="checkbox"/>	11. Religion <input type="text"/>
12.	Nationality	<input type="text"/>	13. Mother Tongue <input type="text"/>
14.	Category	SC <input type="checkbox"/> / ST <input type="checkbox"/> / OBC <input type="checkbox"/> / SEBC <input type="checkbox"/> / PH <input type="checkbox"/> / Others <input type="text"/>	
15.	Identification Mark	<input type="text"/>	
		<input type="text"/>	
16.	Blood Group	O <input type="checkbox"/>	A <input type="checkbox"/>
		B <input type="checkbox"/>	AB <input type="checkbox"/>
		+ <input type="checkbox"/>	- <input type="checkbox"/>

17. Name of College last attended

18. Academic Records

Examination Passed	Name of Board/ University	Name of the School/Institute	Year of Passing	CGPA/Marks obtained	% of Marks Secured	Division/ Class/Grade
HSC						
+2 Sc/Arts/Com.						
+3 Sc./Arts/Com.						
Post Graduation/ Any other						

19. Type of admission test appeared :
Test : JEE MAT CAT XAT ATMA Others
Score/Rank :

20. Are you working any where : Yes No

21. If yes, mention the name of the
 Organisation :
 Designation :

22. Do you interested to stay in Hostel: Yes No

23. Declaration by the Applicant :
 I, _____ certify that the particulars furnished above are correct and true to the best of my knowledge. I affirm that I shall abide by the rules and regulations of the college, now in force and as ammended and adopted from time to time. The Governing Body of the college shall able to take any action in case of any activity subversive to rules and regulation of the college.

Place :
 Date : **Signature of the Applicant**

- List of Enclosures :**
- Attested photocopy (two sets) of Graduation Certificate, original Marksheet, CLC & Aadhar.
 - Four attested recent passport photograph and two stamp size colour photographs.
 - Copy of Score Card
 - Attested copy of SC/ST/OBC/PHY.HANDICAPPED Certificate, if any.
 - Attested copy of Board Certificate in support of Date of Birth.
 - No Objection Certificate (NOC) from the employer in case of in-service candidate.
- (Each certificate shall be countersigned on front side by the candidate in his own handwriting with date)

FOR OFFICE USE ONLY

Application received on : Admitted on : Registration fee paid : Any activity subversive to rules & regulation : Action taken : Release on : CLC issue on : Placement Address :	University Regn. No. OJEE Fee: _____ Course Fee: _____ Total Fee: _____ (_____) <div style="border: 1px solid black; text-align: center; padding: 5px;"> Full Signature of Student </div> <div style="border: 1px solid black; padding: 5px;"> Verified by: Full Signature : Designation : </div>
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