



Raheja Education Complex, Kher Nagar, Opp. Chhatrapati Shivaji Ground, Bandra (East),
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Affix Recent
Colour Passport
Size Photograph
and attach two
additional
photographs

Class: _____
Division: _____
Roll No.: _____
Course: _____

MMS ADMISSION FORM
ACADEMIC YEAR: 2016-17
(USE BLOCK LETTERS ONLY)

Specialization opted for : Marketing/Finance/Human Resources/Operations [() Mark One]

CET ROLL NO.	Seat Type	CET Exam	Total Marks/ Out of	CET Score/ Percentile

Admission Type: Institute Level Cap-I Cap-II Cap-III Cap-IV Against Cancellation

1. Name of the Candidate

A) Surname

B) Own Name

C) Father's/Husband's Name

D) Mother's Name

E) Mother Tongue

2. Gender

Male Female Others

3. Date of Birth

Age: _____ Years
D D M M Y Y Y Y

4. Marital Status

5. Nationality

Religion _____

6. A) Category

General Reserved

B) Caste, if Reserved, kindly specify

SC ST NT DT OBC Other _____

C) Sub-Caste, if any, kindly specify

D) Non-Creamy Layer Certificate

Yes No

7. State of Origin

8. a) Address (Permanent)

b) Address (Local)

9. Mobile No./Phone No.

Residence

10. E-Mail ID

11. a) Father's/Guardian's Office Name
Address and Designation

b) Annual Income (₹)

Phone No. Office

Residence

Mobile No. Office

Residence

12. Person with Disability: PH-1 Blind PH-2 Dumb & Deaf PH-3 Orthopedic disorders

13. Educational Background

Education	Marks Obtained	%	Grade	Month & Year of Passing	Board/ University	Name of the Institution
10th (SSC)						
12th (HSC)						
Bachelor's Degree ()						
Master's Degree ()						
Any Other ()						

14. Work Experience

Name of the Company	Designation	Duration		Salary	Nature of the Job
		From	To		

DECLARATION

I, hereby, declare that all information provided by me is true to the best of my knowledge and belief and that any discrepancy found, herein, will automatically imply cancellation of my Admission to the MMS Post-Graduate Degree Course. I am aware that my Admission to the MMS Post-Graduate Degree Course is PROVISIONAL and is subject to the confirmation by the AICTE/DTE/University of Mumbai and related competent authority. I know that an incomplete Admission Form is liable to be summarily rejected.

I agree to abide by the Rules and Policies of the B-School contained in its Brochure in letter and spirit and I understand that they are binding on me.

Student's Signature: _____

Guardian's Signature: _____

Place: _____

Date: _____

FOR OFFICE USE ONLY

Receipt No.: _____

Admitted

Date: _____

Amount: _____

Director