

## Sheila Raheja School of Business Management & Research

(Bombay Suburban Art & Craft Education Society's)
Accredited by NAAC

4<sup>th</sup> Floor, Raheja Education Complex, Kher Nagar, Opp. Chhatrapati Shivaji Ground, Bandra (East), Mumbai- 400051.

## **FYBMS ADMISSION FORM**

**ACADEMIC YEAR: 2023-24** 

(USE BLOCK LETTERS ONLY)

Affix Recent
Color Passport Size
Photograph

Name of the Candidate									
A) Surname									
B) Student 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 MM Y Y Y Y								
4. Marital Status									
5. Nationality									
6. A) Category	General Reserved								
B) Caste, if Reserved, kindly specify									
C) Sub-Caste, if any, kindly specify									
D) Non-Creamy Layer Certificate	Yes No								
7. Blood Group									
8. State of Origin									
<b>G</b>									
9. a) Address (Permanent)									
b) Address (Local)									
10. Mobile No./ Phone No.: Student's									
Parent's/ Guardian's	(Residence)								
11. E-Mail ID of Student									
Anti-Ragging Undertaking Reference N	umber:								

12. a) Father's/Guardian's Office Name  Address and Designation											
b) Annual Income					]						
c) Email ID of Pare	nt's/ Guard	lian's									
13. Educational Back	ground										
Education	Marks Obtained	Percentage	Grading	Month & Year of Passing	Board / University	N	Name of the Institution				
10th (SSC)											
12th (HSC)											
Any Other											
			DECL	ARATIONS		I					
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 Under Graduate Degree BMS Course. I am aware that my admission to the Under Graduate Degree BMS Course is PROVISIONAL and is subject to the confirmation by University of Mumbai and related competent authority. I know that an incomplete Admission Form is liable to be rejected.											
I agree to abide by t Research and I unde					ja School of Bi	usine	ss M	ana	gem	ien	t and
Place:			Date:								
Student's Signature:			Guardian's Signature:								
			FOR OFF	TICE USE ONLY							
Receipt No:			Admitted								
Date:			-								
Amount:			_ Director								