



# MARWAR EDUCATION FOUNDATION

**Programme Form** (to be filled in by applicant only, in own hand-writing)

**No.**

**Institution being applied to** (please tick mark  $\checkmark$  only one)

- Aravali Institute of Management
- Aravali Institute of Career Education
- Aravali Entrepreneurship Incubation Park
- Aravali-Spandan Academy for Ethics, Values & CSR

**Programme being applied for** \_\_\_\_\_

(Kindly refer to pages 19 & 20 of Information Brochure to select the Post-Graduate Programme)

Please carefully note that

- ❖ This Programme Form is an important part of the admission selection process. Therefore, accurate and complete answers are crucial. Incomplete information will adversely affect your chances of selection. Admission granted on the basis of false information will be cancelled.
- ❖ In all matters pertaining to the admission to this programme, the decision of the Institute authorities will be final and binding on the applicant.

## PERSONAL DATA

Written Test Given : \_\_\_\_\_

**You must also enclose photocopy of the concerned Written Test Score Card (Original to be produced at the time of Group Discussion & interview)**

Paste your  
**RECENT**  
passport size  
photograph here

Name : \_\_\_\_\_

(In CAPITAL letters)

Gender :  Male  Female

Nationality : \_\_\_\_\_

Date of Birth : \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
(Day) (Month) (Year)

Marital Status :  Single  Married

Gross Annual Family Income : Rs. \_\_\_\_\_

Father/Husband's Name : \_\_\_\_\_

Complete Mailing Address for all communications: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ City \_\_\_\_\_ Pin Code \_\_\_\_\_

Tel. (with STD code) \_\_\_\_\_ Mobile \_\_\_\_\_

E-mail \_\_\_\_\_

**ACADEMIC TRACK-RECORD**

- ❖ Provide complete information about examination details in respective columns. Information provided by you in these columns MUST TALLY with those in the original mark sheets.
- ❖ Wherever you have received letter grades or grade points instead of marks, give equivalent marks and attach a certificate from the Registrar/Principal/Head of the Department explaining the method of conversion.

**1. Pre-Graduation** (Starting with 10<sup>th</sup> Standard)

Examination	Name of Board/ University	Year of Passing	Total Max. Marks	Total Marks Obtained	% Marks Obtained	Class/ Division

**2. Graduation** (From a recognized University)

Name of College/Institute : \_\_\_\_\_

Name of University : \_\_\_\_\_

Faculty/Subject : \_\_\_\_\_

Mode of Study :  Regular (Full-time)  Part-time  External (Correspondence)

Graduation Degree : \_\_\_\_\_ Duration : \_\_\_\_\_

**Fill in below the total of marks obtained by you in all the subjects (including optional, subsidiary, internal, elective, minor, language, etc.) taken in each year of your graduation irrespective of whether these are counted for granting Class/Division.**

Year	Period		Max. Marks/ GPA	Marks/GPA Obtained	% of Marks Obtained	Class/ Division
	From	To				
First Year						
Second Year						
Third Year						
Fourth Year						
Fifth Year						
		<b>Total</b>				

Explanation of letter grades/grade points \_\_\_\_\_ :

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

If you are still to appear for the final year of your graduation examination, please indicate when it is going to be held : \_\_\_\_\_

*(Please note that if you are selected for admission to Aravali, it would be provisional admission in case you are not able to submit photocopies of your graduation mark-sheet and degree at the time of registration. However, you will have to still submit, at the time of registration, a certificate from the Principal/Director/Registrar of your College/Institute/University to the effect that except the declaration of the results, you have completed all the requirements for graduation. Thereafter you will have to submit photocopies of mark-sheet and degree also latest within three months. Non-fulfillment of these requirements will automatically result in cancellation of the provisional admission).*

**3. Post-Graduation (if any)**

Name of College/University/Institute : \_\_\_\_\_

Degree : \_\_\_\_\_ Faculty/Subject : \_\_\_\_\_

Mode of Study :  Regular (Full-time)  Part-time  External (Correspondence)

Year	Period		Subjects	Max. Marks/ GPA	Marks/GPA Obtained	% of Marks Obtained	Class/ Division
	From	To					
First Year							
Second Year							
			<b>Total</b>				

**4. Professional Qualification (if any)**

Name of College/University/Institute : \_\_\_\_\_

Course of Study (e.g. CA, ICWA, etc.) : \_\_\_\_\_

Year	Period		Subjects	Max. Marks/ GPA	Marks/GPA Obtained	% of Marks Obtained
	From	To				
Inter						
Final						
			<b>Total</b>			

**ACADEMIC PROGRESS ANALYSIS**

Kindly analyze and describe the strengths and weaknesses which you have identified in yourself during your academic career so far :

**WORK EXPERIENCE**

Organization	Period		Designation	Monthly Salary	Reasons for leaving
	From	To			

Total work experience : \_\_\_\_\_ Year(s) and \_\_\_\_\_ Month(s)

Please describe briefly your responsibilities, achievements and failures during your work experience :

**EXTRA-CURRICULAR ACTIVITIES**

Kindly give details of the positions held and awards received in sports, games, hobbies, associations and voluntary organizations :

Activity	Position/Role	Participation Level	Awards/Honours	Remarks

Indicate your accomplishments in spare time activities and other interests :

**FUTURE CAREER PLANS**

What use you will make of this professional education :

**STATUS OF HEALTH**

Kindly give details of any physical disability or chronic illness, if any, you have :

**DECLARATION**

I hereby certify and confirm that all the information and details furnished by me in this Programme Form are true to the best of my knowledge. I agree to provide documents and proofs in support of the above at the time of registration or whenever asked by the Institute.

I am fully aware that if any of these information and details is found to be incorrect or deficient at any time then my admission, if selected, would be liable to be summarily cancelled. I agree that the fees once paid to the Institute are non-refundable under any circumstances. I also accept that all matters related to my admission and studies at the Institute are subject to the jurisdiction of the courts at Jodhpur only.

I agree to abide by decisions of the Institute authorities in all matters related to my admission. I have gone through the Information Brochure and accept all the rules & regulations contained therein.

Place : \_\_\_\_\_

Date : \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

**Please go through this Programme Form once again to ensure that you have completed all the items.**