भारतीय सामग्री प्रबंधन संस्थान

Indian Institute of Materials Management

Application Form

Form No.

COURSE	(Please ✓mark)	PGDMM		PGDL&SCM	
Roll No.					
(FOR IIMM USE)					
Choice of Exam Centre(Select from the prospectus)					



Photograph to be attested duly signed across by student

1 **NAME OF THE APPLICANT** (in **BLOCK LETTERS**) as 10+ 2 marks sheet/UG/PG/PGD Certificate

Surname | **Name**

2 **Father's Name / Husband Name**

Surname | **Name**

3 **Mother's Name / Husband Name**

Surname | **Name**

4 **Date of Birth** **DAY** **MONTH** **YEAR**

5 **Sex** Male Female 6 **Nationality** Indian Others

7 **Category (Pl✓mark)** **General** **SC** **ST** **OBC** **PH**

8 **Student's email ID**

9 **Address to which communication is to be sent** (Name not be mentioned)

Pin Code **Mobile No.**

10 **Office Address** (Name not be mentioned)

Pin Code **Mobile No.**

P.T.O

11	**Educational Qualification** (Attested Xerox copies must be enclosed)				
		Name of Degree	**University Name**	**Year of Passing**	**%**
	❖ **P.G Degree**				
	❖ **Degree**				
	❖ **10+2**				
	❖ **Aadhar Card**				

12	**Experience Profile**(Please mention from current Job title) – Attested Xerox copies must be enclosed.			
	ORGANIZATION	**JOB TITLE**	**PERIOD**	
			FROM	**TO**

13	How did you get to know about **IIMM COURSES** (Please ✓ mark)							
	Newspaper		**Website**		**Friends**		**Others (Pl. Specify)**	

DECLARATION / UNDERTAKING

- ❖ I declare that all the information submitted in this application from is correct and complete. I acknowledge that the Indian Institute of Materials Management reserves the right to vary or reverse any decision regarding admission on the basis of incorrect or incomplete information provided by me.
- ❖ I declare further that I had read & understood all contents of this application form, prospectus & information brochure and that I am bound by all their contents for all purpose.
- ❖ I have no objection, if I receive any SMS or Email from IIMM.
- ❖ I hereby declare that in case of any grievances, I shall approach to the Student Grievances Committee for appeal and their decision will be final.

Date										**Signature of the Candidate**	

FOR IIMM USE

Aptitude Test Details	**Max. Marks**	**Min. Marks**	**Marks Obtained**	**Admitted**	
➢ Aptitude Test	100	50		Yes	
➢ Viva Voce	100	50		No	

Signature of Course Coordinator