



**INNOVATION –THE BUSINESS SCHOOL, BHUBANESWAR**  
APPLICATION FOR ADMISSION TO TWO YEAR FULL TIME PGDM

Affix  
Passport  
size  
Photograph

**1. Details of MAT/CAT/XAT/ATMA/CMAT/GMAT/O-JEE**

Date of Test	Roll Number	Score

**2. PERSONAL DETAILS**

Name in Block letters (As recorded in the 10 <sup>th</sup> Board certificate)			
Date of Birth			
Sex	Male	Female	
Nationality	<input type="checkbox"/>	<input type="checkbox"/>	
Religion			
Category (SC/ST/OBC/GEN/OTHERS)			
Blood Group			
Mother Tongue			
Passport No.		Date of Expiry:	
PAN No.:			
Email			
Mother's Name			
Father's Name			
Occupation			
Organisation			

**3. ADDRESS DETAILS**

Permanent Address			Address for Correspondence		
H.No			H.No		
Street			Street		
City			City		
State			State		
Country			Country		
Pin			Pin		
Phone	STD Code:	Number:	Phone	STD Code:	Number:
Mobile	(+91)		Mobile	(+91)	

**4. EDUCATION (Starting from Matriculation)**

Qualification	Institute/University	Year		% Score	Main Subjects
		From	To		

## 5. ACADEMICS & OTHER DISTINCTIONS/ ACHIVEMENTS

5.1	
5.2	

## 6. WORK EXPERIENCE (if any)

Sl. No	Organisation	Designation	Period		Remarks
			From	To	

## 7. DETAILS OF APPLICATION FEE PAID

DD No./ Cash	Payable at	Bank	Date	Amount

### The following documents to be attached to the application form:

- 1 If application fee paid by DD then -Demand draft of Rs. 500/- drawn in favor of 'Innovation Trust' payable at Bhubaneswar
- 2 Copy of certificates related to educational qualifications, other academic records and work experience
- 3 Proof of Blood Group
- 4 Copy of PAN CARD
- 5 Copy of MAT/CAT/XAT/ATMA/CMAT/GMAT/O-JEE score card

## DECLARATION BY THE APPLICANT

I certify that all the information furnished in this application form for getting admission in IBS are correct, complete and to best of my knowledge. I agree to abide by all the existing rules and regulations of the Institution. I also agree to abide by all the modified rules and regulations of the Institution in future. I understand that withholding or giving false information will make me ineligible for admission in IBS. I understand that the application fee and the program fees paid to IBS are neither refundable nor transferable under any circumstances. I also understand that in case I discontinue the course in between, I am liable to pay the complete program fees.

Place:

Signature of the applicant

Date:

Signature of parent's/Guardian