

# Department of Inter-Disciplinary Studies

## Institute of Integrated Himalayan Studies

(UGC Centre for Excellence)

Himachal Pradesh University, Gyan Path, Summer Hill Shimla-5

### MBA (RD)

(Note: Please attach two extra passport size photographs and attested copies of the certificate of Matriculation for showing the date of birth, Result card/Marks card of qualifying examination and SC/ST Category certificate with this form. If you are working somewhere then provide NOC from the employer)

1. Name of the Candidate \_\_\_\_\_ (In CAPITAL Letters)
2. Father's Name: \_\_\_\_\_
3. Mother's Name \_\_\_\_\_
4. Date of Birth (As in Matric Certificate). \_\_\_\_\_
5. Age as on 1<sup>st</sup> July, 2017: \_\_\_\_\_
6. Sex (Male / Female) \_\_\_\_\_
7. Category (SC/ST/Genl/Physically Handicapped/ Cultural/Sports) \_\_\_\_\_
8. Are you H.P. Bonafide: Yes/ No) \_\_\_\_\_  
(If yes, attach attested copy of Bonafide Certificate)

Please Affix PP size  
(3.5 cm x 4.5 cm)  
photograph duly  
attested by Class I  
Gazatteed officer

#### 9. Details of Qualifying Examination (Please attach attested copies of the result card)

S. No.	Exam Passed/ Appeared	Board/ University	Year of Passing	Marks Obtained	Maximum Marks	%*	Exam** Roll No
1.	Matriculation or equivalent						
2.	10+2 or equivalent						
3.	Graduation (B.A / B.Sc./ B.Com /BBA/ B.Tech.) or equivalent						
5.	Others						

**Note: \*** Correct up to two decimal places

**\*\*** Exam Roll No of Qualifying Examination must be given

10. Mobile No. \_\_\_\_\_ Landline No. \_\_\_\_\_ E-mail ID \_\_\_\_\_

11. Address for Correspondence \_\_\_\_\_  
\_\_\_\_\_ PIN \_\_\_\_\_

12. Permanent Address \_\_\_\_\_  
\_\_\_\_\_ PIN \_\_\_\_\_

13. Details of Fee deposited, Amount Rs. \_\_\_\_\_ D.D/IPOs No  
 \_\_\_\_\_  
 Dated \_\_\_\_/\_\_\_\_\_/20\_\_\_\_
14. Were you ever disqualified / suspended by the university or any other Institution form attending classes or appearing in any exam? If yes give details \_\_\_\_\_

**Declaration by the Applicant and the Guardian**

1. I declare that all the information given by me in this application form is correct to the best of my knowledge. I am conscious of the fact that if any of the information is found to be incorrect, my admission is liable to be cancelled.
2. I have read carefully the Handbook of Information supplied by the University and I undertake to abide by the rules and regulations of the H. P. University, Shimla.
3. I hold myself responsible for payment of University dues on dates according to the schedule given in the Handbook of Information.
4. I shall fulfill the attendance requirements as given in the Handbook of Information, failing, which I shall have no claim to sit in the examinations.
5. I declare that if I am found to have been involved in the act/s of ragging / indiscipline / misconduct during my studies at the Institution / Hostels / any premises of the University, I may be dealt with as per provision of statute 23.A and recommendations of the Committee constituted by the Hon'ble Supreme Court of India in SLP No. 24295 of 2006 (Raghvan's Committee Report).

Date:...../...../20.....      Signature of the Father / Guardian      Signature of the Applicant

<b>For Office Use Only</b>		
1. Diary Number: _____	2. Roll Number Assigned: ____	3. Centre Assigned:
4. Category : _____	5. Internal/Open:	6. Group:
7. Age :Within Age / Overage : ____	8. H.P. Bonafide: Yes/No :	9. Marks in Q. Exam (%):
10. Eligibility: Eligible/Ineligible : ____		
11. Reason, if not eligible:		
12. Remarks, If any:	Checked by: Signature	Checked by: Signature

**NOTE:** Please read carefully the eligibility conditions given in the prospectus before filling the application form.

The application form duly filled along with the required documents and D.D / I.P.Os of Rs.500/- (for General Category) and Rs. 350/- (SC/ST/BPL from H.P State) in favour of **Director, IIHS, H. P. University, Shimla-5**, should be submitted to **The Director, Institute of Integrated Himalayan Studies, Himachal Pradesh University, Summer Hill Shimla-171005**