



Nimgaon Gramin Shikshan Prasarak Mandal Nimgaon Tal- Malegaon , Dist- Nashik

KARMAVEER BHAUSAHEB HIRAY INSTITUTE OF MANAGEMENT & RESEARCH

(Approved by AICTE New Delhi / DTE Mumbai / Affiliated to Savitribai Phule Pune University)
Malegaon

	stitute Code – 5447 PPLICATION FORM – MBA	Category	Form No.: Category: SC / ST / NT1 / NT2 / NT3 / DT / OBC / SEBC OPEN (EBC / Minority)							
K .	, e Director, B.H. Institute of Management & Ro alegaon Camp, Malegaon – 423105.									
Sir	, I hereby apply for admission (to the	MBA Course) in your College.							
1.	Full Name of Candidate (In Block Le									
		irst Name)	(Father / Husband's Name)							
2.	Mother's Name:	•••••								
3.	Full Name of Candidate in Devnagar									
	Permanent Address									
			Mobile No. :							
	Name & Address of Parent/ Guardia									
			PIN							

E-mail Mobile No. :

6.Date of Birth:						Place of Birth:							
Age:													
Sex:								Nationality:					
Cast:			Sub Cast:										
Category: SC / ST / NT1 / NT2 / NT3 / DT / OBC / SBC / OPEN (EBC / Minority)													
Type of Candidate: Home University / Other than Home Uni/ All India Seats / Institute Level. 7. Academic Information: (Provide details of the Examination)													
Examination	amination Name of the Examining Body / University		Month & Year of Passing	Name & Address of the College			Specification of degree & Marks Above		% Percent		Attempt		
S.S.C.	0 122 /	<u></u>											
H.S.C.													
DEGREE													
P.G. / ANY													
OTHER													
8. CET	/ Othe	er Qualify	ying Exam	Deta	ails :				1				
Name of the Exam Name of the					Year &	Marks in Written		Marks in	Total	Percentile			
		Examini	ning Body		Month	Exam		GD & PI	Marks				
9. Work	к Ехре	erience (I	f any)										
Name of Company			Tota	Total Experience			Designation						

Remark of Accountant

Director

Signature of Student