UNIVERSITY OF MUMBAI JAMNALAL BAJAJ INSTITUTE OF MANAGEMENT STUDIES (Autonomous)

Instructions for Admission to MMM, MFM, MIM, MHRDM Programs (Batch 2016-2019)

- 1) Download the application form from www.jbims.edu
- 2) Application fee is Rs. 1200/- /Course/ Candidate.
- 3) Completely filled application form should be submitted to JBIMS office in person.
- 4) You may pay with demand draft. Demand draft payable at Mumbai in favour of "Director, JBIMS".
- 5) Proof of age, caste, education qualification, minimum 2 years supervisory/ executive experience after declaration of result of graduation be attached.
- 6) Incomplete application forms will not be considered.
- 7) Appearance to the Admission Test written test and group discussion does not confirm eligibility of the candidate.
- 8) The written test is multiple choice objective type questions test. ¼ negative mark for every wrong answer. Questions will be based on comprehension, quantitative ability, logic, general knowledge.

Test date – Saturday, 5th December, 2015 Reporting Time – 10.00am, Test – 11.00am to 01.00pm Group Discussion (GD) – Sunday, 6th December, 2015

Last date for accepting the application – 30th November, 2015.

9) Submission details:-

Application forms should be submitted between 11.00 a.m. to 1.00 p.m. and 1.30 p.m. to 4.00 p.m. on working days (except on Sundays, Second and Fourth Mondays and Public Holidays).

- 10) Hall Ticket is part of application form. When the form is submitted to office, office will stamp the photograph. Candidate must carry the Hall ticket for all activities during admission process.
- 11) Cancellation of Admission:- Admission can be cancelled under the ordinance 0.3574. The tuition fee paid by a candidate for the course in which he/she is registered as a post-graduate student will be refunded to him if he leaves the said course without attending any lectures, seminar or practicals, subject to a deduction of 25% of the tuition fee there from as the administrative charges. An application by the candidate for refund will only be entertained if it is received by the Director within 15 days from the date commencement of the lectures of the academic year in which the fee is paid.
- 12) A candidate who had been passed out from other than University of Mumbai should submit the **original Migration Certificate** at the time of admission.
- 13) For further details contact on: **022-22747700/22747705**

UNIVERSITY OF MUMBAI

JAMNALAL BAJAJ INSTITUTE OF MANAGEMENT STUDIES (Autonomous) APPLICATION FOR ADMISSION TO MASTER DEGREE PROGRAMME MMM/MFM/MHRDM/MIM Batch 2016-2019

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	4. Th	e last date o	of submi:	ssion of	the app	olication	is 30	th Nov	/embe	r, 2015								
1.	Please	put a tick a	ıgainst th	ne cours	se appli	ed for :												
	1	. MASTER	R'S DEGR	REE IN M	ARKETI	NG MAN	IAGEN	IENT					(MMN	1)				
	2	. MASTER	R'S DEGR	REE IN FI	NANCIA	L MANA	GEME	NT					(MFM)				
	3	. MASTER	r's degr	REE IN H	UMAN R	ESOUR	CES D	EVLO	PMEN	ΓMANA	GEMEN	١T	(MHR	DM)				
	4	MASTER	R'S DEGR	REE IN IN	IFORMA	TION M	ANAGI	EMEN	T				(MIM)					
2.	Name	of the App	licant (lı	n Block	Letter)			•										
Shri	./Smt./k	Kum.																
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	* A candidate belonging to a category other than General Category must submit the cast certificate, validity certificate and other documents as required by the Government regulations. University other than Maharashtra Name of the University																	
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		Course	MI	MM	Mi	FM	MH	IRDM		MIM								

Application Form No.

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6.	Gen	dor	

7.Date of Birth

1	Male	
2	Female	

Day	Month	Year		

Year	Months

7. Educational Background

	Educat (Marks	tional Qua in app	lifications ropriate bo	x)	Year of Passing	% of marks	Class/ Grade	Name of Board / University
A. Undergraduate/Diploma (Specify)								
1.	S.S.C							
2.	H.S.C							
3.	3. Intermediate							
4.	Polytech	nic						
5.	Defence	Service D	iploma					
B. Bachelor's / Master's Degree					1			
1.	2.	3.	4.	5.				
B.A	B.A B.Sc B.Com B.E/ Other Specify							
M.A M.Sc M.Com M.E/ Other B.Tech Specify								
C. P								

8. Professional Qualifications:

					Year of Passing	% of Marks	Class/Grade	Name of Board/University
1.	2.	3.	4.	5.				
AMIE	ACA	AICWA	ACS	Others Specify				

9. Have you successfully completed any of the Management Degree/ Diploma Programmes recognized by University of Mumbai.

Programme	College / Institute attended	Year of Passing	% of marks	Class/Grade

10. Work Experience (as on 15th June 2016 Supervisory/Executive	ve Cadre)
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As Executive /Supervisory	Years			Months		
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11. Position Held: (Mention all your work experience after graduation and if work experience Is in more than one company, work-experience certificate/s are to be Enclosed and the same has to be mentioned in the column below).

	Name and Address of Organisation	Ser	vice	Work Experience of Service In Months	Designation of Nature of work	Total Monthly Income
		From	То			
PRESENT POSITION						Rs
LAST POSITION Total Work Experience						Rs

Note: Use separate sheet if above space is insufficient.

12. Name and (IN BLOC	d Addres K LETTE	s of yo R)	ur Emp	loyer to	whom r	eference	e may be	e made r	egardin	g your w	ork exp	erience			
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13. Applicant's	address	for co	ommui	nicatio	n : (In	Block	k Lette	ers)											
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for refund will only b				receiv	ed by	the D	Directo	r withi	n 15 d	ays fro	om the	date	comm	encen	nent of	f the le	ctures	of the	9
academic year in w	nich the	fee is	paid.																
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I hereby declare that of the Institute.	at the inf	ormati	ion giv	en in	this ap	oplicat	ion fo	rm is c	omple	te and	l true.	If adm	itted, I	agree	e to co	mply	with th	e rule:	S
PLACE :																			
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														(Signa	ture of	the App	plicant)		

UNIVERSITY OF MUMBAI

JAMNALAL BAJAJ INSTITUTE OF MANAGEMENT STUDIES (Autonomous)

Dadabhai naoroji House, 164, Backbay Reclamation, H. T. Parekh Marg, Mumbai – 400 020.

(For Office use only)

Application No		Rec	Passpo photog sign	Date
	HALL TICKET (Written Test & GD)			
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Name:				
Address:			Pass	nort size
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Tel. No. (O)(F	₹)		•	• .
Mobile No			31	gnou
Email				
Course applied (please tick mark in the block):				
MFM MMM MHRDM MIM				
Instructions-				
1. Applicants will be required to produce this ca	ard with photo intact at the time of written test/	Group disc	ussion	
2. Written test and Group discussions will be h	eld on the following dates:			
Date of written test – 5 th December, 2015				
Reporting time – 10.00 a.m.				
Date of group discussion –				
MIM/ MFM /MMM/MHRDM- 6 th December, 2	015			
Reporting time – One hour before your allotte	ed slot for GD			
3.The detailed time-table for the group discuss (www.jbims.edu) onDecember, 2015 at		the institute	s official wel	bsite
4. NO FURTHER COMMUNICATION WILL BE	E SENT INDIVIDUALLY TO THE APPLICANT	S IN THIS F	REGARD.	

Format of Experience Certificate from Employer on letter head of Company.

		Date :							
	To whom so ever	it may concern	<u> </u>						
	This is to certify that Mr./Mrs./Ms								
is	working in our company since / was working	in our company from _							
to	period	as	(Name of the	Post).					
Th	e said post is a supervisory/executive cadre.								