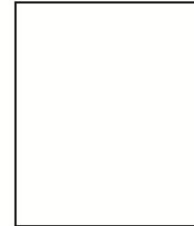




ADMISSION FORM



METRO INSTITUTE OF MANAGEMENT AND TECHNOLOGY

Admission in _____

Specialization 1 _____ Specialization 2 _____

Student Name _____ Father's/Husband's Name _____

Mother Name _____ Date of Birth (proof attached) _____

Gender _____ Nationality _____

Current Employer _____ Service provider of _____

Location _____ Duration _____

Previous Employer _____ Service provider of _____

Location _____ Duration _____

Total Experience (In Years) _____

Permanent Address (Proof Attached)

Communication Address (Proof Attached) _____

Mobile No _____ Alternate Number _____

Email ID _____

Qualification Details

Additional qualification (if any) _____

Examination Mode-online/Open Book _____

Total Fees _____ Corporate _____

In Words _____

Paid _____ Cheque /DD _____

In Words _____

References

Name _____ Name _____

Contact _____ Contact _____

Company _____ Company _____

Declaration

I hereby declare that the information furnished here in is true and correct. I have read all the terms and conditions of the institute. In case any information furnished found incorrect at any stage i agree to relinquish the claim for admission .i declare that all the Xerox copies submitted by me at the time of admission are true and genuine.

Signature of the Student