



# St. Francis Institute of Management and Research

(AICTE APPROVED AND AFFILIATED TO MUMBAI UNIVERSITY)

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Form No: \_\_\_\_\_

## ADMISSION FORM Post Graduate Degree in Master of Management Studies (MMS)

2017 - 2019

photo 3.5x2.5

To be filled in by the candidate in **BLOCK** letters in his own handwriting .Please ( ✓ ) in box wherever applicable.

1. Name : \_\_\_\_\_  
(Surname) (First Name) (Father's Name) (Mother's Name)
2. a) Date of Birth : \_\_\_\_\_  
(In Figures) (In Words)
- b) Place of Birth: \_\_\_\_\_  
(District) (City) (State)
3. Male or Female: \_\_\_\_\_ 4. Married or Single: \_\_\_\_\_ 5. Blood Group : \_\_\_\_\_
6. (a) Nationality : \_\_\_\_\_ b) Religion : \_\_\_\_\_ c) Mother Tongue : \_\_\_\_\_
7. (a) Mobile No.: \_\_\_\_\_ (b) E-mail Address: \_\_\_\_\_
8. Do you belong to SC/ST/VJ/NT-1/NT-2/NT-3/OBC/Hindu Maratha/OPEN Category?: \_\_\_\_\_  
Caste: \_\_\_\_\_ Sub Caste: \_\_\_\_\_
9. Category : 1)  Minority 2)  ACAP-Minority 3)  Institutional Seats 4)  CAP 5)  ACAP
10. University: A)  University of Mumbai B)  Other than University of Mumbai in Maharashtra  
C)  Out of Maharashtra State D)  Jammu & Kashmir

Name of University : \_\_\_\_\_  
State : \_\_\_\_\_

11. **ENTRANCE TEST** : (Please ✓ any One entrance test)

1. MAH-MBA/MMS-CET 2017
2. CAT (conducted by IIMs)
3. MAT 2017 (conducted by AIMA)
4. ATMA (conducted by AIMS)
5. XAT (conducted by XLRI)
6. CMAT 2017 (conducted by AICTE)
7. GMAT

a) APPLICATION ID NO: \_\_\_\_\_ b) ROLL NO: \_\_\_\_\_ c) Month/Year: \_\_\_\_\_

d) SCORE :

e) PERCENTILE:

12. **ACADEMIC QUALIFICATIONS:**

(a) **Pre-University:**

Name of Examination	Board	Year of Passing	% of Marks	Div./Class
Std X				
Std XII				

(b) **Graduation:**

Name of Examination	University	Year of Passing	% of Marks	Div./ Class	CGPA	Grade
First Year or First Sem.						
Second Year or Second Sem.						
Third Year or Third Sem.						
Fourth Sem.						
Fifth Sem.						
Sixth Sem						
Seventh Sem.						
Eighth Sem.						

Note: a) *In case of CGPA students should give the equivalent percentage. Please attach the applicable conversion scale for reference.*  
b) *Wherever Semester system is applicable please enter all Semester marks.*

(c) **Post Graduation/Any Other:**

Name of Examination	University	Year of Passing	% of Marks	Div./ Class	CGPA	Grade
First Year						
Second Year						

Note: If there is any break in studies please explain

13. (a) Permanent Address: \_\_\_\_\_

\_\_\_\_\_

Resi. Tel. No.: \_\_\_\_\_

(b) Mailing Address :(If different from above): \_\_\_\_\_

\_\_\_\_\_