



**SARASWATI EDUCATION SOCIETY'S  
YADAVRAO TASGAONKAR**

Institute of Management Studies & Research  
Two Years Post Graduate Diploma in Business Management  
(Approved by A.I.C.T.E. New Delhi)



REGISTRATION NO. :

**REGISTRATION FORM**

DATE :

Affix here a  
Stamp Size  
Photograph

- Full Name: Mr./ Mrs./ Ms. (in Block Letters) .....  
(Surname) (First Name) (Middle Name)
- Father's /Husband's Name ..... Mother's : .....
- Date of Birth : .....  
(Day) (Month) (Year)
- Address for Correspondence (in Block Letters) : .....  
.....  
Town/City : ..... State : ..... Pin : .....  
Telephone: ..... Residence : .....  
Mobile : ..... E-mail : .....
- Academic & Professional Qualification : (start with highest degree)

University/Institution	Degree / Diploma	Duration	Year of Passing
A.			
B.			
C.			
D.			

(Attested Copies of University Degree/Professional Qualification must be enclosed)

- Please List your scores for all the listed competitive entrance test you have taken. (Enclose photocopy of Marksheet)

Test	Registration Number	Scores		Date dd/mm/yy
		Percentage	Percentile	
CAT				
XAT				
ATMA				
MAT				
CET (Mah)				
Others				

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