



(b) **GRADUATION DETAILS**

Graduation Degree Title (in full form)	Medium of Instruction	Duration (Years) Please tick (✓)	Month & Year of Passing	% of Marks*
		<input type="checkbox"/> 3 Years <input type="checkbox"/> 4 Years <input type="checkbox"/> > 4 Years		

\* Marks as calculated by the University.

(c) **ADDITIONAL QUALIFICATIONS (Please give the details of qualifications attained only)**

Program	Name of the Institute / University	Medium of Instruction	Duration (years)	Month & Year of Passing	% of Marks*

(d) **AWARDS AND RECOGNITIONS**

List awards, distinctions, honors and scholarships (academic, extracurricular, professional, community, etc).

Awards	Year	Basis
1.		
2.		
3.		
4.		
5.		

Attach additional sheets, if required.

3. **HEALTH**

Did/Do you suffer from any major illness/disability in the past/present? Please tick (✓)

Yes       No. If "yes", please give details : \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

4. **LEGAL CASES (Have you ever been convicted or is any case pending against you in any court of law ? If yes, details.)**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5. **WORK EXPERIENCE** [Please enclose the Experience Certificates from your Employer]

**Present Organization/Company Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

\_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Pin \_\_\_\_\_

**Tel:** \_\_\_\_\_ **Website :** \_\_\_\_\_

(STD) Tel No. \_\_\_\_\_

**Type of Company:**  Private Listed  Private Un-Listed  Public  Others \_\_\_\_\_

**No. of Employees** \_\_\_\_\_ **Annual Turnover (Rs. in crores)** \_\_\_\_\_ **Designation** \_\_\_\_\_  
(If, Others please specify Nature of Business)

**Name of the Reporting Officer:** \_\_\_\_\_ **Reporting Officer Designation:** \_\_\_\_\_

**How long have you been holding the designation** \_\_\_\_\_ **How long have you been employed by the compny** \_\_\_\_\_

**Annual Compensation: Rs.** \_\_\_\_\_ **Responsibilities held:** \_\_\_\_\_  
(Cost to Company)

**Previous Work Experience\***

Please give the details in the chronological order (from latest to previous) of your work experience

		1	2
Name of the Organization			
Period	From		
	To		
Designation			
Address of Organization			
Telephone			
Website			

\* Additional sheets may be used, if required.

6. **Briefly write about your 3 years Experience at supervisory\managerial level.**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

7. **CAREER GOAL**

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**8. FAMILY BACKGROUND**

(a) No. of Brothers:  No. of Sisters:  Are you married:  Yes  No  No. of Children

**(b) Parents**

Father		Mother	
Name		Name	
Qualification		Qualification	
Occupation	<input type="checkbox"/> Business <input type="checkbox"/> Professional <input type="checkbox"/> Central Govt. <input type="checkbox"/> State Govt. <input type="checkbox"/> Public Sector <input type="checkbox"/> Private Sector <input type="checkbox"/> Others (please specify) _____	Occupation	<input type="checkbox"/> Business <input type="checkbox"/> Professional <input type="checkbox"/> Central Govt. <input type="checkbox"/> State Govt. <input type="checkbox"/> Public Sector <input type="checkbox"/> Private Sector <input type="checkbox"/> Others (please specify) _____
Designation		Designation	
Salary/Income		Salary/Income	
Organization & Address		Organization & Address	
City:	_____	City:	_____
Mobile:	_____	Mobile:	_____
Personal E-mail:	_____	Personal E-mail:	_____

\* Please Indicate: **Business, Professional, Central Govt., State Govt., Public Sector, Pvt. Sector, etc.**

**9. Have you been associated with ICFAI earlier?**

Yes  No. If "yes", please provide details : .....

**10. Do you know any one in the ICFAI system?**

Yes  No. If "yes", please provide details : .....

**11. DECLARATION**

I certify that the information presented in this Application Form is accurate, complete and honest. I am aware of the eligibility criterion for the program. I understand and agree that any inaccurate information, misleading information or omission will be a cause for the withdrawal of any offer of admission or for disciplinary action, dismissal or revocation of diploma, certificate, or degree if discovered at a later date. I understand that all admissions are based strictly on merit and declare that I will not violate the rules against canvassing directly or indirectly to seek admission and/or to seek any undue/special favors outside the framework of rules in force from time to time. I hereby understand and accept that the decision of admission by the Admissions Committee is final and binding on me.

Place:.....

Applicant's Signature : .....

Date : .....

Name : Mr./Ms. ....