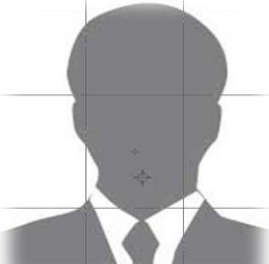




| Application Form                                  |   |      |                |  |         |        |       |      |             |          |  |        |  |    | Form No. |        |  |     |  |  |  |    |  |
|---|---|------|----------------|--|---------|--------|-------|------|-------------|----------|--|--------|--|----|----------|--------|--|-----|--|--|--|----|--|
| COURSE  |   |      | (Please ✓mark) |  |         |        | PGDMM |      |             | PGDL&SCM |  |        | <div><p>Photograph to be attested<br/>duly signed across by student</p></div> |    |          |        |  |     |  |  |  |    |  |
|   |   |      |                |  |         |        |       |      |             |          |  |        |  |    |          |        |  |     |  |  |  |    |  |
| Roll No.  |   |      |                |  |         |        |       |      |             |          |  |        |  |    |          |        |  |     |  |  |  |    |  |
|   |   |      |                |  |         |        |       |      |             |          |  |        |  |    |          |        |  |     |  |  |  |    |  |
| (FOR IIMM USE)                                    |   |      |                |  |         |        |       |      |             |          |  |        |  |    |          |        |  |     |  |  |  |    |  |
| Choice of Exam Centre(Select from the prospectus) |   |      |                |  |         |        |       |      |             |          |  |        |  |    |          |        |  |     |  |  |  |    |  |
| 1   | NAME OF THE APPLICANT (in BLOCK LETTERS) as 10+ 2 marks sheet/UG/PG/PGD Certificate |      |                |  |         |        |       |      |             |          |  |        |  |    |          |        |  |     |  |  |  |    |  |
|   | Surname   |      |                |  |         |        |       | Name |             |          |  |        |  |    |          |        |  |     |  |  |  |    |  |
|   |   |      |                |  |         |        |       |      |             |          |  |        |  |    |          |        |  |     |  |  |  |    |  |
| 2   | Father's Name / Husband Name  |      |                |  |         |        |       |      |             |          |  |        |  |    |          |        |  |     |  |  |  |    |  |
|   | Surname   |      |                |  |         |        |       | Name |             |          |  |        |  |    |          |        |  |     |  |  |  |    |  |
|   |   |      |                |  |         |        |       |      |             |          |  |        |  |    |          |        |  |     |  |  |  |    |  |
| 3   | Mother's Name / Husband Name  |      |                |  |         |        |       |      |             |          |  |        |  |    |          |        |  |     |  |  |  |    |  |
|   | Surname   |      |                |  |         |        |       | Name |             |          |  |        |  |    |          |        |  |     |  |  |  |    |  |
|   |   |      |                |  |         |        |       |      |             |          |  |        |  |    |          |        |  |     |  |  |  |    |  |
| 4   | Date of Birth   |      |                |  |         | DAY    |       |      | MONTH       |          |  | YEAR   |  |    |          |        |  |     |  |  |  |    |  |
|   |   |      |                |  |         |        |       |      |             |          |  |        |  |    |          |        |  |     |  |  |  |    |  |
| 5   | Sex   | Male |                |  |         | Female |       | 6    | Nationality |          |  | Indian |  |    |          | Others |  |     |  |  |  |    |  |
|   |   |      |                |  |         |        |       |      |             |          |  |        |  |    |          |        |  |     |  |  |  |    |  |
| 7   | Category (Pl ✓mark)   |      |                |  | General |        |       |      |             | SC       |  |        |  | ST |          |        |  | OBC |  |  |  | PH |  |
|   |   |      |                |  |         |        |       |      |             |          |  |        |  |    |          |        |  |     |  |  |  |    |  |
| 8   | Student's email ID  |      |                |  |         |        |       |      |             |          |  |        |  |    |          |        |  |     |  |  |  |    |  |
|   |   |      |                |  |         |        |       |      |             |          |  |        |  |    |          |        |  |     |  |  |  |    |  |
|   |   |      |                |  |         |        |       |      |             |          |  |        |  |    |          |        |  |     |  |  |  |    |  |
| 9   | Address to which communication is to be sent (Name not be mentioned)                |      |                |  |         |        |       |      |             |          |  |        |  |    |          |        |  |     |  |  |  |    |  |
|   |   |      |                |  |         |        |       |      |             |          |  |        |  |    |          |        |  |     |  |  |  |    |  |
|   |   |      |                |  |         |        |       |      |             |          |  |        |  |    |          |        |  |     |  |  |  |    |  |
|   |   |      |                |  |         |        |       |      |             |          |  |        |  |    |          |        |  |     |  |  |  |    |  |
|   |   |      |                |  |         |        |       |      |             |          |  |        |  |    |          |        |  |     |  |  |  |    |  |
| Pin Code  |   |      |                |  |         |        |       |      | Mobile No.  |          |  |        |  |    |          |        |  |     |  |  |  |    |  |
| 10  | Office Address (Name not be mentioned)  |      |                |  |         |        |       |      |             |          |  |        |  |    |          |        |  |     |  |  |  |    |  |
|   |   |      |                |  |         |        |       |      |             |          |  |        |  |    |          |        |  |     |  |  |  |    |  |
|   |   |      |                |  |         |        |       |      |             |          |  |        |  |    |          |        |  |     |  |  |  |    |  |
|   |   |      |                |  |         |        |       |      |             |          |  |        |  |    |          |        |  |     |  |  |  |    |  |
|   |   |      |                |  |         |        |       |      |             |          |  |        |  |    |          |        |  |     |  |  |  |    |  |
| Pin Code  |   |      |                |  |         |        |       |      | Mobile No.  |          |  |        |  |    |          |        |  |     |  |  |  |    |  |
|   |   |      |                |  |         |        |       |      |             |          |  |        |  |    | P.T.O    |        |  |     |  |  |  |    |  |

|    |  |                |            |  |                 |  |                      |                 |                                 |    |
|----|--|----------------|------------|--|-----------------|--|----------------------|-----------------|---------------------------------|----|
| 11 | <b>Educational Qualification</b> (Attested Xerox copies must be enclosed)  |                |            |  |                 |  |                      |                 |                                 |    |
|    |  | Name of Degree |            |  | University Name |  |                      | Year of Passing |                                 | %  |
|    | ❖ P.G Degree   |                |            |  |                 |  |                      |                 |                                 |    |
|    | ❖ Degree   |                |            |  |                 |  |                      |                 |                                 |    |
|    | ❖ 10+2   |                |            |  |                 |  |                      |                 |                                 |    |
|    | ❖ Aadhar Card  |                |            |  |                 |  |                      |                 |                                 |    |
| 12 | <b>Experience Profile</b> (Please mention from current Job title) – Attested Xerox copies must be enclosed.  |                |            |  |                 |  |                      |                 |                                 |    |
|    | ORGANIZATION   |                |            |  | JOB TITLE       |  |                      |                 | PERIOD                          |    |
|    |  |                |            |  |                 |  |                      |                 | FROM                            | TO |
|    |  |                |            |  |                 |  |                      |                 |                                 |    |
|    |  |                |            |  |                 |  |                      |                 |                                 |    |
|    |  |                |            |  |                 |  |                      |                 |                                 |    |
|    |  |                |            |  |                 |  |                      |                 |                                 |    |
|    |  |                |            |  |                 |  |                      |                 |                                 |    |
| 13 | How did you get to know about <b>IIMM COURSES</b> (Please ✓ mark)  |                |            |  |                 |  |                      |                 |                                 |    |
|    | Newspaper  |                | Website    |  | Friends         |  | Others (Pl. Specify) |                 |                                 |    |
|    |  |                |            |  |                 |  |                      |                 |                                 |    |
|    | <b>DECLARATION / UNDERTAKING</b>   |                |            |  |                 |  |                      |                 |                                 |    |
|    | ❖ I declare that all the information submitted in this application form is correct and complete. I acknowledge that the Indian Institute of Materials Management reserves the right to vary or reverse any decision regarding admission on the basis of incorrect or incomplete information provided by me.<br>❖ I declare further that I had read & understood all contents of this application form, prospectus & information brochure and that I am bound by all their contents for all purpose.<br>❖ I have no objection, if I receive any SMS or Email from IIMM.<br>❖ I hereby declare that in case of any grievances, I shall approach to the Student Grievances Committee for appeal and their decision will be final. |                |            |  |                 |  |                      |                 |                                 |    |
|    |  |                |            |  |                 |  |                      |                 |                                 |    |
|    | Date   |                |            |  |                 |  |                      |                 | Signature of the Candidate      |    |
|    |  |                |            |  |                 |  |                      |                 |                                 |    |
|    | <b>FOR IIMM USE</b>  |                |            |  |                 |  |                      |                 |                                 |    |
|    | Aptitude Test Details  |                | Max. Marks |  | Min. Marks      |  | Marks Obtained       |                 | Admitted                        |    |
|    | ➤ Aptitude Test  |                | 100        |  | 50              |  |                      |                 | Yes                             |    |
|    | ➤ Viva Voce  |                | 100        |  | 50              |  |                      |                 | No                              |    |
|    |  |                |            |  |                 |  |                      |                 | Signature of Course Coordinator |    |