

Application Number : LMC

LOURDES MATHA COLLEGE OF SCIENCE & TECHNOLOGY

DEPARTMENT OF MANAGEMENT STUDIES



Lourdes Hills, Kuttichal P O, Thiruvananthapuram – 695574 | Phone : 0472-2853550 / 2853546
 Fax : 0472-2853846 | E-mail : info@lmcst.ac.in | Website : www.lmcst.ac.in | City office : 0471-2302481
 Minority Status Educational Institution | Approved by AICTE & Affiliated to the Kerala Technological University
 Member of Kerala Catholic Engineering College Managements' Association
 Under the Arch Diocese of Changanacherry & Managed by LMCES



APPLICATION FORM FOR ADMISSION TO MBA FULL - TIME PROGRAMME 2017 - '19

DD/Cash Receipt No :					Dated :					Affix a recent stamp size photograph of the Applicant (Do not Staple)					
(Fill in Block Letters or Tick wherever is applicable)															
01. NAME OF APPLICANT (As entered in 10th certificate)															
02. EXPAND INITIALS (if any)															
03. AGE			04. DATE OF BIRTH				D	D	M	M	Y	Y	Y	Y	
05. GENDER		M	F	06. PLACE OF BIRTH											
07. RELIGION				08. CASTE											
09. COMMUNITY			<input type="checkbox"/> SC	<input type="checkbox"/> ST	<input type="checkbox"/> OBC	<input type="checkbox"/> GENERAL	* If belongs to any reservation category, attach relevent certificates								
10. ADDRESS			<i>Permanent</i>				<i>Communication</i>								
			PIN								PIN				
11. PHONE NUMBER															
12. E-MAIL ID															
13. FATHER'S NAME							OCCUPATION								
14. MOTHER'S NAME							OCCUPATION								
15. NATIONALITY							16. ANNUAL FAMILY INCOME								
17. KMAT / CMAT / CAT SCORE							MONTH & YEAR								

18. DETAILS OF MARKS SECURED FOR SSLC & 10+2							
NAME OF EXAMINATION	NAME OF INSTITUTION	NAME OF BOARD / UNIVERSITY	YEAR OF PASSING	MARKS SECURED	MAX. MARKS	% OF MARKS	CLASS / RANK
SSLC / X							
10+2 / XII							

19. DETAILS OF MARKS SECURED IN GRADUATION							
COURSE	PARTS OF EXAMINATION	NAME OF BOARD / UNIVERSITY	YEAR OF PASSING	MARKS SECURED	MAX. MARKS	% OF MARKS	CLASS / RANK
BA , B.Sc & B.Com	PART III						
BBA, B. Tech & LLB	Year 1						
	Year 2						
	Year 3						
Others	Year 4						
	Year 5						

20. ADDITIONAL ACADEMIC QUALIFICATIONS (if any)

21. WORK EXPERIENCE (if any)

22. HOBBIES AND EXTRACURRICULAR ACTIVITIES

DECLARATION BY THE APPLICANT

I, solemnly declare that the details furnished are true. I also understand that any wrong information furnished by me will forfeit my claim for admission. I will obey the rules and regulations of the institution, if admitted. I shall submit all certificates and documents in original at the time of admission, failing which my admission will be liable for cancellation.

I shall not resort to ragging in any form at any place and shall abide by the rules/laws prescribed by Courts, Governments, affiliating university & College authorities for the purpose from time to time.

Place :

Date :

Name & Signature of the Applicant

DETAILS OF TRUE COPIES TO BE ATTACHED ALONG WITH THE APPLICATION

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|---|--|
| 1. SSLC/ Equivalent Certificate | 2. Marklist of +2/CBSE/ISC |
| 3. Degree/Provisional Certificate | 4. C MAT/K MAT/CAT Score card |
| 5. Transfer Certificate | 6. Conduct Certificate |
| 7. Migration Certificate | 8. Community Certificate (for SC/ST/OBC) |
| 9. For downloaded application form a DD of Rs 500/- in favour of Principal LMCST payable at Trivandrum. | |

FOR OFFICE USE ONLY

Academic Score	KMAT / CMAT / CAT Score	
Interview & GD Score	Total	

Admission No. :	Admitted / Not Admitted	Director / Principal
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