

International institute of Management & Technology, Bhubaneswar
(Recognised by Dept. of Higher Education, Govt. of Odisha & Utkal University)
INMT Campus, Plot No-K8/682, Kalinga Nagar, Bhubaneswar, Khordha - 751003, Odisha

APPLICATION FORM

INSTRUCTION: The application form has to be filled in clearly and legibly in your own handwriting. Incomplete forms may be rejected.								
Preference								
		MFC	M.Sc	MSW	PGDCA			
GENERAL INFORMATION		~~~~~~	~~~~~	.~~~~~	~~~~~			
01. Name of the Candidate (in Block Letters)								
02. Father's Name								
03. Mother's Name								
04. Date of Birth	D D M M Y	YY	Y					
05. Mother's Tongue								
06. Address for Correspondence (in block letters)								
	District State							
	Pin Code Phone with Area code							
	Email ID							
07. Permanent Address (in block letters)								
	District			State				
	Pin Code		Phone with	Area code				
	Mob. No.		Filolie with	Miea code				

08. Name & Address of Legal Guardian (If both parents are not a in Block Letters) 09. Religion 11. Category (Tick which the control of the	District Pin Code	10. Mar	Phone with OBC	State Starte Sta	Unma	arried T
Name of the Examination	Board/ University	Name of the College/Institute	Year of Passing	Major Subject	Class/Hons Distinction	
A. Matriculation/HSC Examination Equivalent						
B. +2/Higher Secondary/ Equivalent						
C. B.A / B. Sc. / B.com / B.Sc. (Ag.) / B. Tech. Equivalent						
D. PG. Degree / Diploma Specific if any						
E. Any other (specify)						
15.Work Experience in	n chronologic	al Order. Attach a se	***************************************	-		
Designation Name of the Organisation		e Organisation		od of Servic (Date) to (Date	Name of the Job	
I declare that the information	on furnished in this	DECLARA s application are true to the	e best of my kno	wledge and beli	ef. I understand	that my applicatio

Signature of the Candidate (in Full) Place