# AMITY INSTITUTE FOR COMPETITIVE EXAMINATIONS

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Amity Campus, Sector-44, Noida-201303. Ph.: 95120-2431839, 2431842

## REGISTRATION CUM ADMISSION FORM - GMAT

RECENT PHOTOGRAPH

### *Student Information*

Name

Date of Birth (DD MM YY)

Mobile No.

E-mail

Address for Correspondence (in capitals)

Qualification B.E/B.Tech (Pursuing) ☐ | B.A./B.Com/B.Sc. ☐ | Master ☐ | Post Graduate ☐

Please attach a photocopy of the original marksheet (12th onwards)

| Class | Year of passing | Name of the Board/University | Name of Institutions | Percentage |
|---|---|---|---|---|
| | | | | |
| | | | | |

How did you come to know about this programme: Newpaper ☐ TV/Radio ☐ Word of Mouth ☐ Others (specify) ☐

### *Parent's Information*

| | | | |
|---|---|---|---|
| Father's Name | | Mother's Name | |
| Occupation | | Occupation | |
| Mobile No. | | Mobile No. | |
| E-mail | | E-mail | |
| PAN | | PAN | |

Permanent Address (in capitals)

I hereby declare that all the particulars furnished above are true to the best of my knowledge and belief.

Date : _____ Place : _____ Signature of Student Signature of Parents/ Gaurdian

**Admission No.** _____ **FOR OFFICE USE ONLY**

**Fee Detail :**

| S.No. | Amt. Paid in Cash/DD/Cheque | DD/Cheque details | Balance Amt. | Remarks |
|---|---|---|---|---|
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |
| 4 | | | | |

**Name and Signature of Marketing Head**