

MBA in Entrepreneurship
+
PG Diploma in Enterprise Management

APPLICATION FORM

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MBA in Entrepreneurship
+ PGDEM

Form No.

Please complete the form in BLOCK LETTERS

1. PERSONAL DETAILS

Full Name:

First Name

Middle Name / Initial

Last Name / Surname

Nationality:

Passport Number:

Valid till: (DD/MM/YYYY):

Date of birth (DD/MM/YYYY): __/__/----

Gender: Male Female

Please affix
passport-size photograph

Parent's name:

Mobile Number:

Parent's Profession:

If parent has his / her own business, then indicate industry / sector / business area and business financial indicator (annual revenue / turnover etc.) _____

Permanent Address (These are the contact details we will use to communicate with you)

Home Address:

City:

Pincode:

Country:

E-mail ID (essential for communication):

Landline Telephone (including area code):

Mobile Number:

2. ACADEMIC CREDENTIALS/ EDUCATION:

Please list below, starting with the most recent, all qualifications achieved. Please provide information about the results you achieved. Also indicate whether you studied part- time (PT), full - time (FT) or distance learning (DL) and the qualification awarded (Bachelor, Masters, Postgraduate Diploma, etc).

IMPORTANT: certified copies of certificates, degrees, and professional membership certificates will need to be attached as annexure to this application. If submitting application form online please scan the actual mark sheets and upload after filling the table below

Date of Entry month/year	Date of Graduation month/year	FT/PT/DL Study	University/ Institution / Country	Qualification Obtained	% Obtained	Class/Grade

3. FULL - TIME EMPLOYMENT HISTORY: (IF APPLICABLE)

Total number of years of full - time work experience at start of program _____ year's _____ months

Please complete this table starting with your current/latest employer. Additional information may be provided on a separate sheet as a table.

EMPLOYMENT DETAILS (If not applicable, write N.A.):

Please enclose an annexure stating your responsibilities for each position listed here.

No.	Name and address of the employer	Your positions	From	To

4. STATEMENT OF PURPOSE (Describe your vision, motivation (3-5 years) and help us understand why you should be selected from the national pool of applicants.) (upto 500 words)

5. BRIEF WRITE UP ON BUSINESS IDEA / IDEAL LEADERSHIP ROLE

(Please tick one)

First Generation Entrepreneur

Leadership Role / Intrapreneur

Family Business

6. ANNEXURES

Tick the Boxes as applicable

1.	Certified photocopy of final year of the bachelor`s program.	<input type="checkbox"/>
2.	Certificate of fitness from a registered medical practitioner.	<input type="checkbox"/>
3.	Two references - to be filled in the given reference letter format	<input type="checkbox"/>

This Application form should be completed in full and submitted with the above annexures. Incomplete forms are liable to be rejected

7. APPLICANT'S DECLARATION:

- I certify that the information given by me herein is complete and accurate to the best of my knowledge.
- I understand and accept that the application process fee and the program fees are non-refundable under any circumstances
- I understand and accept that it is my responsibility to obtain the relevant documentation requested & authorize Institution / University where necessary, to obtain further information from the appropriate educational institutions.
- I understand and accept that this information will be retained on a database for administrative and regulatory purposes.
- I understand and give consent to use my photo and name for news items, advertising, and publicity for program as deemed necessary by the institution.
- I understand and give consent to Institution / University to reserve the right to change any provision or requirement at any time, even within a student's term of enrolment, and that the institution further reserves the right to ask any student to withdraw from the program, for any due cause, at any time, without any refund of the program fees.
- I understand and give consent to Institution / University to publish any part or all of my submitted work for academic, external or internal purposes as required by the institution.
- I understand that Institution / University reserves the right to modify its fees, to add or withdraw members from its faculty or administration, and to arrange its courses, programmes, and facilities as teaching and economic exigencies render it desirable.
- I understand that admission to the program is conditional upon my acceptance and compliance with the rules and regulations of Institution / University as now established or hereafter revised.
- I agree to abide by the rules & regulations and the payment schedule for the program fees as established by Institution / University.
- I have read and understood the 'terms and conditions' of the program and I agree to abide by the same.

By signing I agree to (7. Applicant's declaration)

Applicant Signature

Date: _/ _/ _ _ _ _

Place: _____

Please send your completed application form along with a DD of Rs. 1,200/- payable at bangalore in favour of "Jain University" along with annexure and other required documents to:

Mailing address:-

JGI Knowledge Campus - Admissions office
5th Floor, # 44/4, District Fund Road,
Jayanagar 9th Block, Bangalore 560069
Ph: +91-80-43430936

Please fill in your payment details here

Payment Mode DD Online Fund Transfer Cash Deposit

DD No. / Transaction ID:

Bank:

Branch:

Dated: