



CHME Society's

Dr. Moonje Institute of Management & Computer Studies

(Affiliated to S.P. Pune University & Approved by AICTE New Delhi)

Bhonsala Military College Campus Rambhoomi, Nashik – 422 005

Ph. No. (0253) 2309617,2342840,6519128 Tele fax-(0253) 2309617

Date-

ADMISSION FORM (A.Y.-2016-17)

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To
The Director,
Dr. Moonje Institute, Nashik

Respected Sir,

I am applying for the admission for _____ I undertake that, I shall abide by all the rules & regulations made by the Institute, University, DTE, AICTE, PNS & SSS from time to time.

Full Name : _____
(IN CAPITAL LETTERS) SURNAME NAME MIDDLE NAME

Course:- MBA – Part – II MCA – Part – II MCA Part – III
(Please tick the right one)

Permanent _____

Address: _____

Student Mobile No. _____ E-Mail _____

Date of Birth: ____/____/____ Gender: Male Female Transgender

Category: SC ST OBC SBC VJ NT-1(B) NT-2(C) NT-3(D) OPEN
(Please tick the right one)

Bank A/c. No. (Nationalized Bank) _____ Bank Name _____

a) Parent details

Name: _____

Address: _____

Occupation: _____

Ph. No.: (R) _____ (O) _____ (M) _____

b) Local Guardian details

Name: _____

Address: _____

Occupation: _____

Ph. No.: (R) _____ (O) _____ (M) _____

UNDERTAKING

1. I am fully aware that my admission is provisional, until full fees are paid by me & all required original documents / certificates are submitted by me.
2. I hereby submit to the disciplinary jurisdictions of Institute, University, DTE, AICTE, PNS & SSS and shall abide by all rules & regulations made by them from time to time.
3. I have carefully noted the eligibility rules, which I required to follow & in the matters of interpretation, shall accept the decision given by Director, Dr. Moonje Institute in this respect as final & binding.
4. I hereby give my consent to adjust my scholarship / freeship amount to my balance fees as & when received from Government / concerned authority. I am ready to accept remaining amount after fee adjustment through bank.
5. I shall abide by Anti-Ragging act enforced by Government, AICTE, Pune University, DTE & Admission authorities in & out of campus & hostel.
6. I hereby declare that the above given information is true & correct. If any suppress of information or wrong information is found, I shall accept the decision given by the Director, Dr. Moonje Institute in this respect as final & binding.
7. For Hostelites - I am abiding all the rules and regulations of BMC's hostel and Dr. Moonje Institute won't be responsible for any consequences.
8. I will take part in all the extracurricular and co-curricular Activities held at DMI and I am aware that I will have to pay Fees for the same as a fine for not attending the Activities.
9. I am fully aware that 75% attendance is compulsory, in case of default I will not be allowed to appear for the exams.
10. I will follow Dress Code on all working days and I am aware that disciplinary action will be taken in case of default.

Name & signature of Applicant
Date:

Name & signature of Parent / Local Guardian
Date:

(For Office use only)

Office & Accounts

Hostel Authorities

Programme Co-ordinator

I/C. Director

Director

CASH DENOMINATION				IN CASE OF CHEQUE OR DD PAYMENT			
1000	*		=		Cheque No.	Bank Name	Amount
500	*		=				
100	*		=				
50	*		=				
20	*		=				
10	*		=				
Coins	*		=				
Total			=				