



INDIAN INSTITUTE OF MANAGEMENT INDORE Application Form

EXECUTIVE POST GRADUATE PROGRAMME IN MANAGEMENT (EPGP)

Commencing September 2012

INSTRUCTIONS TO CANDIDATES

1. This application form is an important part of the admission process. Filling the form accurately and completely is therefore, extremely important. Incomplete or false information will adversely affect your chances of selection. *Admission granted on the basis of false and/or misleading information will be ipso facto null and void.* Read the brochure before filling the form.
2. In all matters relating to admission to the programme, the decision of the Institute will be final and binding on the applicant.
3. The completed application form should be sent to – EPGP Admissions, Indian Institute of Management Indore, Prabandh Shikhar, Rau – Pithampur Road, Indore – 453331. (M.P.), India. It should reach IIM Indore on or before 15th May, 2012.

Demand Draft No: _____ Demand Draft Date: _____ Bank _____

Application Fee : Rs 3500/- for Indian Nationals and U.S.\$110 for Foreign Nationals. Enclose Demand Draft in favour of "IIM Indore"

payable at Indore

A. PERSONAL DATA

Name: _____
(In CAPITAL letters) As recorded in your academic certificates

Sex Male Female Nationality

Date of Birth
Day Month Year

Permanent Address: _____

_____ PIN Code: _____ Phone: _____

Affix your
RECENT
passport size
colour
photograph here

Please give your complete mailing address (valid at least till September 2012) in CAPITAL letters for intimating the final result.

Name: _____
(Last name or surname) (First Name) (Middle name/initial)

Address: _____

City: State Country

Pin Code Email : _____

Tel.(R): Tel. (O): Mobile

IF APPLYING THROUGH CAT -:

CAT 2011- Test Registration Number

CAT SCORE -: (Obtained in CAT 2011)

Sec-1 Quantitative Ability & Data Interpretation		Sec-2 Verbal Ability & Logical Reasoning		Total	
Score	Percentile	Score	Percentile	Score	Percentile

Enclose Certified Photocopy of CAT Score card

IF APPLYING THROUGH GMAT :-

GMAT Score Report									
(GMAT score obtained between January 1, 2009 and March 31, 2012)									
Test Date		Scaled Scores							
Month	Year	Verbal score	% Below	Quant Score	% Below	Total Score	% Below	AWA Score	% Below

Enclose Certified Photocopy of GMAT Score card

B. ACADEMIC RECORDS

- a) Provide complete information on examination marks in all columns. Marks stated in these columns **MUST MATCH** those in the original mark sheets.
- b) Wherever you have received letter grades or grade points instead of marks, provide equivalent marks and attach a certificate from Registrar/ Principal/ Head of the Department explaining the method of conversion. Where such conversions are not possible, please provide an explanatory note in the additional space provided below. The Admission Committee's decision in such cases would be final.

1. Pre-Bachelor's Degree Examination(s):

Examination	Name of Board/Institute	Year of Passing	Maximum Marks	Total Marks Obtained	% of Marks Obtained	Class/ Division/ Rank**
Secondary/equiv.						
Higher Sec./equiv.						

2. Bachelor's Degree Examination

Name of University/Institute from which graduated

Title of Degree: Discipline (Stream):

Duration of your Bachelor's degree course 2 yrs 3 yrs 4 yrs 5 yrs

Mode of Study (Please tick the relevant box) Regular (Full time) Part-time External (Distance education)

Did you have Mathematics or Statistics as a formal subject at graduation level? Yes No

Details of the Bachelor's Degree exam	Month & Year of Exam	Maximum Marks/GPA	Marks/GPA Obtained	% of Marks Obtained	Class/ Division/ Rank**

**Please be prepared to produce certificates/evidence if a rank is mentioned.

Space for explanation of letter grades/grade points

- Please note that if selected you will be allowed to join the programme only if you produce all certificates/mark-sheets satisfying your eligibility at the time of registration for the said programme.

3. Post-Graduate Diplomas (mention only those diplomas which are awarded by recognised institutions/Universities)

a) Title of Diploma: Duration of the course:

Main subject(s) of the course:

Name of the Institute/University awarding the diploma : Percentage of Marks/GPA obtained:

b) Title of Diploma: Duration of the course:

Main subject(s) of the course:

Name of the Institute/University awarding the diploma : Percentage of Marks/ GPA obtained :

4. Master's Degree

Title of Degree: Specialization:

Name of University/Institute attended

Year	Month & year of passing	Main Subjects taken in each year	Max. Marks/ GPA	Marks/ GPA Obtained	% of Marks Obtained
Part I/ 1st Year					
Part II/ 2nd Year					
Month & Year of Examination			Overall percentage of marks obtained		

5. Post-Graduate Professional Examination

Give details of the last two professional courses you have successfully completed (e.g. CA, ICWA, CS etc.)

a) University/Institute registered with: _____

Name of the course of study (such as CA, ICWA) : _____

Year	Month & year of passing	Main Subjects taken in each year	Max. Marks/ GPA	Marks/ GPA Obtained	% of Marks Obtained
Inter/ 1st Year					
Final/ 2nd Year					
Month & Year of Examination			Overall percentage of marks obtained		

b) University/Institute registered with: _____

Name of the course of study (such as CA, ICWA) : _____

Year	Month & year of passing	Main Subjects taken in each year	Max. Marks/ GPA	Marks/ GPA Obtained	% of Marks Obtained
Inter/ 1st Year					
Final/ 2nd Year					
Month & Year of Examination			Overall percentage of marks obtained		

C. ACADEMIC CAREER

- a) **Scholastic Achievements**
Please list scholastic awards or scholarships conferred on you.

- b) Please describe your strengths and weaknesses that you have identified in yourself as a *student*.

(use additional sheets if required)

D. WORK EXPERIENCE RECORD

- Mention **ONLY full-time, paid** work experience **after obtaining** Bachelor's degree.
- Do not include training/project work done as an integral part of any curricular requirement.

1. Employment/Professional Work Record

Organization	Designation	Joining date	Leaving date	Monthly remuneration (Rs.)	Reasons for leaving
Total Work Experience as on March 31,2012					
					Months

2. Entrepreneurial Experience Record

Organization	Nature of Business	Annual turnover	Date of starting operation	Are you still part of the Organization? (if not, date of leaving)	Nature and Level of your responsibilities

3. Professional Record:

Profession	Membership in Professional body	Membership number	Member since (date)	If practicing independently, the name style and place.

In your present job /entrepreneurial venture/ profession, briefly describe your job responsibilities, achievements, and failures (use additional sheets, if required).

E. DISCONTINUITY IN CAREER

If work experience and academic/professional qualifications do not account for the entire period from the time you completed the 10th standard till date, please specify the **time gaps**, with full explanation.

F. EXTRA-CURRICULAR ACTIVITIES

Indicate your extracurricular interests.

Please give details about your accomplishments, awards received and position held (a) in sports, games, and hobbies, (b) in associations and voluntary organizations. (Please be prepared to produce certificates when asked for)

(use additional sheets if required)

G. CAREER PLANS

Please outline briefly how you perceive the Executive PG Programme helping you in achieving your future career plans/ prospects.

H. HANDLING A SITUATION

Identify a significant incident or situation from your own life. Briefly explain its nature, its importance to you and the manner in which you handled it (use an additional sheet, if required).

I. MEDICAL RECORD

Please state whether you have any existing physical disability or any chronic illness, including mental illness, which could affect your studies at the Institute. The information given here will be held in strict confidence.

In the event of your having been afflicted with any health disorder viz. diabetes/hypertension/heart ailment/mental illness, etc., please provide details below:

	Nature of health disorder	Time period at which the disorder set in	Date of commencement of treatment	Date of completion of treatment	Remarks, if any
1.					
2.					
3.					

Preferred Interview Center:-

(Please indicate the centers in the order of preference, 1 for first preference)

BANGALORE		DELHI		DUBAI		HYDERABAD	
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INDORE		KOLKATA		MUMBAI		SINGAPORE	
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IIMI reserves the right to change /drop any of the centers.

J. DECLARATION

I clearly understand that if I am selected, I will be allowed to join the programme only if I satisfy all requirements of the institute at the time of commencement of the programme i.e. 1st September 2012.

I certify that the particulars given by me in this application form are true to the best of my knowledge and belief. I understand that **admission granted on the basis of false and/ or misleading information will be *ipso facto* null and void.** I agree to abide by the decision of the institute authorities regarding my selection/non-selection for the programme.

Place

Date

Signature of Applicant

Documents to be attached with the application form

Self attested photocopies of all the documents listed below for producing at the time of interview should be attached with the application.

Documents required at the time of Interview:

1. Candidate's original CAT/GMAT Score Card
2. Original and Attested photocopies of all academic marksheets and certificates from 10th Standard.
3. Original and Attested photocopies of the medical certificate and experience certificates
4. Original and Attested copy of the passport if not a resident Indian.

Note : Originals will be returned to candidates after the interview

PLEASE READ THIS FORM ONCE AGAIN AND MAKE SURE THAT YOU HAVE COMPLETED ALL THE ITEMS RELEVANT TO YOU AND HAVE FULLY COMPLIED WITH ALL THE REQUIREMENTS.

LEAVE THIS SPACE BLANK
