

Form No. :

Please complete all questions in BLOCK CAPITALS in blue or black ink and complete the check-boxes as appropriate. This Application Form must be completed in all respects and signed before submission.

Non-refundable Application Charges of ₹ 1000 must be remitted along with this Application Form.

Please provide self-attested copies of the documents as mentioned in the document checklist below:

- | | |
|---|--|
| <input type="checkbox"/> 10th Class Marksheet & Certificate | <input type="checkbox"/> Migration Certificate |
| <input type="checkbox"/> 12th Class Marksheet & Certificate | <input type="checkbox"/> Date of Birth Certificate |
| <input type="checkbox"/> Graduation Marksheet & Certificate (as applicable) | <input type="checkbox"/> Address Proof |
| <input type="checkbox"/> Work Experience Certificate (if applicable) | <input type="checkbox"/> Two Passport Size Photographs |

PERSONAL DETAILS

Paste applicant's recent passport-size photo here	First Name :	
	Last Name :	
	Date of Birth :	Age :
	Nationality :	Gender :
	Landline No. :	Mobile :
	E-mail ID :	

Present Address :

.....

Permanent Address :

.....

PROGRAM DETAILS

Post Graduate Program in:

- | | | |
|--|---|--|
| <input type="checkbox"/> International Business Management | <input type="checkbox"/> International Hotel Management | <input type="checkbox"/> Healthcare Administration |
| <input type="checkbox"/> Event Management & Public Relations | <input type="checkbox"/> Infrastructure Management | |

University Program Options:

- | | |
|-------------------------------|------------------------------|
| <input type="checkbox"/> PGDM | <input type="checkbox"/> MBA |
|-------------------------------|------------------------------|

Preferred Batch:

GENERAL INFORMATION

Details of Family Members

Name	Age	Relationship with Applicant	Occupation
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			

Emergency Information:

Blood Group : Insurance Provider :

Emergency Contact : Phone No. :

Are you suffering from any major illness Yes No

If yes, please furnish the details.....

EDUCATION AND SKILLS

Academic Qualifications

(Enter most recent first)

Degree / Diploma	Institute or University	Duration		Grade
		From	To	
1.				
2.				
3.				
4.				

Reason for gap/discontinuance/failure (if any) :

Aptitude Test Taken:

CAT MAT OTHERS If Others, specify :

Test Score :

Professional Certifications/Training Attended

(Enter most recent first)

Program	Institute	Duration		Grade
		From	To	
1.				
2.				
3.				
4.				

How did you learn about **INLEAD**?

- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Education Portal | <input type="checkbox"/> Advertisement | <input type="checkbox"/> Presentation |
| <input type="checkbox"/> Reference | <input type="checkbox"/> Internet | <input type="checkbox"/> Others |

Details :

APPLICATION FEE

Application Charges remittance details :

Application Charges of ₹ 1000/- being paid vide Cash/DD/PO/NEFT No.
dated..... drawn on Bank.....

Bank Details (for electronic transfer):

Punjab National Bank A/C No: 0632002100283346
IFSC CODE : PUNB0063200
BRANCH CODE (MICR) : 091
SWIFT CODE : PUNBINBB1SB

DECLARATION

I hereby declare that:

1. The particulars furnished in this Application Form are true to the best of my knowledge and belief, and I have not knowingly withheld any information that may affect my admission unfavorably.
2. I shall be deemed guilty of gross default/misconduct if it is found that my declarations in this Application Form are false in any respect; and in such an event, INLEAD shall have a right to terminate my admission without prior notice.
3. I have read and agree to abide by all INLEAD student policies and regulations, as listed in the Student Policy Document.
4. I agree that only the covenants of the courts in Gurgaon shall have jurisdiction over any or all matters / dispute that may arise out of this application or subsequent admission through this application.
5. I have never been convicted by a Court of Law for any criminal offence and sentenced to imprisonment or have any criminal proceedings pending against me before a Court of Law.

Place : Signature :

Date : Name :

Indian Institute of Learning & Advanced Development
endeavor of Primordial Systems P. Ltd.
National Expressway-8 81-P Sector-34 Gurgaon 122 001 HR
T: +91 (124) 422 0000 F: +91 (124) 421 8451
Toll Free: 1800 1034 200 www.inlead.in