

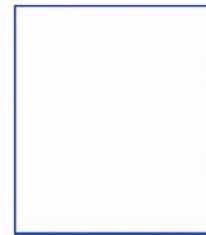


Imperial INSTITUTE OF MANAGEMENT & TECHNOLOGY

Kamaluganja, Main Road, Near Kusumkhara Chowk, Phase-1,
Hari Nagar, Haldwani, Nainital-263 139 (Uttarakhand)
Mob.: 9259937438, 9258177557

APPLICATION FORM

- Name of Applicant (in block letters) : _____
- Father's / Guardian Name (in block letters) : _____
- Postal Address : _____
_____ Pin Code _____ Ph. _____ Mobile _____
- Permanent Address : _____
_____ Pin Code _____ Ph. _____ Mobile _____
- Date of Birth : (Date) _____ (Months) _____ (Year) _____
- Nationality : _____ Place of Birth : (District) _____ (State) _____
- Physical Description : a) Height [] cms. b) Complexion []
c) Colour of Eyes [] d) Colour of Hair []
e) Mark of Identification _____
- Course Applied for : _____
- Educational Qualification :



S. No.	Name of Exam / Board	Subject	% of Marks	Year of Passing
1.				
2.				
3.				

DECLARATION

- I..... S/o, D/o..... hereby declare that all statements made above are correct and true to the best of my knowledge.
- I will not take part in any political or religious activities in the Institute.
- I will not claim any refund or transfer of fee in case, I am unable to complete the course or leaving due to unavoidable circumstances.
- I and my parents / guardians have read, understood the rules and regulations given in the prospectus.
- I understand that fee once paid are not refundable or transferable in any case.
- We accept all decisions of the Institute's authority in all matters related to training, conduct and discipline.
- We also understand that all disputes are subject to the jurisdiction of Haldwani City only.

Signature of Parents/Guardian
(Name in Block Letters)
Place & Date :

Signature of Applicant
(Name in Block Letters)
Place & Date :

CHARACTER & NATIONALITY CERTIFICATE

Certified that Mr./Ms _____ S/o, D/o Shri _____
is known to me for last _____ years/months. He/She bears good moral character and is of _____ nationality.

Date : _____

Place : _____

Signature
Name Designation with Stamp

The certificate should be attested by any one of the followings :

- Gazetted officer of State/Central Govt.
- Member of Parliament/State Legislature.
- Principal of School/College, where candidates studied or studying.

FOR OFFICE ONLY

Application Received on _____ Remarks, Recommended/Not _____ Registration No. _____
Batch No. _____ Adm. Notice sent on _____ Last date of Adm. _____ Date of Joining _____

Approved / Not Approved
Director