

(Approved by AICTE, New Delhi, Recognized by Govt. of Karnataka, Affiliated to Bangalore University, Bangalore)

(To be filled-in by the Candidate in his / her own hand writing in ENGLISH only)

APPLICATION FORM FOR ADMISSION TO M.B.A. / B.B.A FOR THE YEAR

PER	SONAL INFORMATION	
1.	Name of the applicant (As per the 10th Certificate)	And positive and the second of
2.	Complete Present Address to which communication is to be sent with District State and Pincode (Present Address)	
N 10	Phone:	
	E-mail	
3.	Date of Birth and Age (in Christian era)	
4.	Place of Birth and District	
5.	Sex*	Male Female
6.	Nationality	
7.	Religion	
8.	Caste Category	GENL OBC SC ST OTHERS
9.	Special Category	Physically Represented the University Service / NRI Handicapped in athletics and games Ex-Service

^{*} Tick () the appropriate Box in Column Number 5, 8 and 9

ACADEMIC INFORMATION

10.	Name & Address of the school at 10th standard. (SSLC)		
11.	Subjects offered at SSLC	4.1-1 ROTA (IST A.S.)	2.
		3.	4.
12.	Marks Secured at SSLC	Maximum Marks Minimum Marks Marks Secured	
13.	Percentage of marks SSLC		AND
14.	Name & Address of the College at 10+2 Level (PUC)		
15.	Subjects offered at PUC	1.	2.
		3.	4.
16.	Marks Secured at PUC	Maximum Marks Minimum Marks Marks Secured	Flaggran and a spirit
17.	Percentage of marks PUC		
18.	Name & Address of the College / University at Degree Level (10+2+3)		
19.	Subject offered at Degree (10+2+3)	1.	2.
		3.	4.
20.	Marks Secured at Degree (10+2+3)	Maximum Marks Minimum Marks Marks Secured	
21.	Percentage of marks at Degree (10+2+3)	Al adjustance of	

PARENT/GUARDIAN INFORMATION

22.	Name of Parent / Guardian Address for communication		er miant series	Har to
	Phone Mobile	The lates for a single and first time in the appoint of the lates of the single and the single a		
	一种 电电对抗线 即有不知	State Pin :	170	
23.	Occupation and monthly income of the Parent / Guardian			
24.	Does the applicant need Hostel accommodation ?			
25.	Demand Draft Particulars	Name of the Bank Branch DD Number		-1-0
		Amount Date		
26.	Enclosures	Following certificates has been submitted		- Charles
		A STATE OF THE STA	Original	Xerox
	THE RESERVE OF THE PARTY OF THE	a. Marks Card of SSLC		
	ORIGINAL CERTIFICATES SHOULD BE SUBMITTED AT THE TIME OF JOINING THE COURSE	b. Marks Card of PUC		
1		c. Marks Card of Degree		
		d. Convocation Degree Certificate		
		e. Migration Certificate		
		f. Transfer Certificates of last colege attended		nun()
		g. Other Certificates, as may be required by the University		
		h. 10 passport & 10 stamp size photographs		

For all correspondence contact at:

7, 9, Mahadeshwaranagar Extn., Vishwaneedam Post, Herohalli Cross, Magadi Main Road, Bengaluru - 560 091, INDIA Tel: +91-80-23246421 / 23

E-mail: director@oxbridgecollege.in, Website: www.oxbridgecollege.in

DECLARATION BY THE APPLICANT

I declare that all the entries made by me and the documents submitted in support of the information furnished by me in the application form are true in all respects and in case any entry or information or documents is found to be false, this shall entail automatic cancellation of my admission besides rendering me responsible to such action as the college may deem proper.

I note that my admission to the college and my continuance on its roll are subject to the provisions of the Bangalore University Bangalore, Ordinances and other Rules and instructions, I shall abide by the rules of discipline and other rules and instructions which may be issued from time to time in this regard.

ANY FEES OR EXCESS FEES, ONCE PAID, WILL NOT BE REFUNDED OR ADJUSTED OR TRANSFERRED UNDER ANY CIRCUMSTANCES

Place :				
Date				number 199
				SIGNATURE OF THE APPLICANT
	D	ECLARATION E	BY THE PARENT / GUAI	RDIAN
Particulargs give admitted.	en ab <mark>ov</mark> e are corr	ect and I declare	e that my son / daughter	will abide by the rules of the college, if
	40			
		Halla Salta		
		in the state of	of the second	
Place :				
Date		terito apeles to	o ligação Civil value of la	SIGNATURE OF THE PARENT / GUARDIAN
		V	/ERIFICATION	

Place :

Date

Signature of the Principal