

9. Category (Tick Only one) SC ST OBC P/H Other

10. Aadhaar Card No.

--	--	--	--	--	--	--	--	--	--	--	--

11. State of domicile

12. Processing Fee

Name of the Bank									
Transaction ID									
Amount							3	0	0

13. Examination Passed

Board/Univ	Examination Passed	Year of Passing /Passed	Subjects	Percentage	Class /Div

I hereby declare that the above information is true to the best of my knowledge and belief. I also undertake that if I am selected I shall abide by the rules and regulations of ICM, Imphal as Conveyed from time to time which I may be expelled from the Institute.

Place:

Signature of the Applicant

Date:

List of enclosures

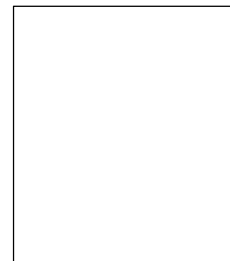
1. Age Proof Certificate
2. Caste/Tribe/P.H Certificate (if applicable)
3. Qualifying certificates & mark sheets
4. Screenshot Copy of Processing fee payment



INSTITUTE OF COOPERATIVE MANAGEMENT, IMPHAL

2021 – 2024

Admit Card for Counselling



1. Course applied for: **Bachelor of Business Administration (BBA)**

2. Name (in block letters)

(in block letters as in the application form)

Signature

do not write anything below this line
(Sl.No. 3 to 5 to be filled in by office)



3. Roll No :

4. Venue of Entrance Test :

5. Date of Entrance Test :

6. Reporting Time :

(Director)

N.B. Application form and Xerox copies of documents mentioned should be sent to icmimphalbba@gmail.com