



D.L. Form :

INDIAN INSTITUTE OF SOCIAL WELFARE AND BUSINESS MANAGEMENT

MANAGEMENT HOUSE, COLLEGE SQUARE WEST, KOLKATA - 700 073**Application form the admission in Post Graduate Diploma in Sports Management, Session : 2018-2019**1. Name : Mr./Ms : _____
(IN CAPITAL LETTERS) FIRST NAME MIDDLE NAME SURNAME

2. Father's / Husband's Name : _____

3. Father's / Husband's Occupation : _____

4. Mother's Name : _____

5. Date of Birth :

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

 (ddmmyyyy)6. Sex :

Male	Female
------	--------

7. Do you belong to Scheduled Caste / Scheduled Tribe / OBC (Tick in the appropriate box)

SC	ST	OBC	N/A
----	----	-----	-----

8. Permanent Address : _____
_____9. Present Address : _____

Affix one recent passport size Colour Photograph

10. Telephone : Residence _____ Office _____ Mobile _____

11. University Registration No. :

12. Academic Qualifications (Secondary onwards)

Examination	Board / University (Also Name of School/College)	Year	Main Subject	Marks Obtained	% of Marks	Class / Div.

13. Other Qualifications / Extra-Curricular Activities : _____
_____14. Work Experience Details (if any) :

YES	NO
-----	----

15. Work Experience Details (if any) :

Organisation Name & Address	Designation	Department	Salary per Month	Period of Service	Short Description of the Job

16. Sports Background if any : _____

17. Email ID of the Applicant : _____

18. Signature of the Applicant with Date : _____

19. Application Fee

--

 Journal No.

--

 Date of Deposit

--

IMPORTANT INSTRUCTION

- Duly Completed application form should reach the Reception of the Institute by 4th June, 2018 at the latest along with the receipted counter foil meant for IISWBM of the State Bank of India, Power Jyoti Account No. 32495656710
- A scanned copy of the completed application form along with a scanned copy of the receipted counter foil meant for IISWBM of the State Bank of India, Power Jyoti Account No. 32495656710 should also be sent by e-mail : admissions@iiswbm.edu for record purpose.