



SLIKUN INSTITUTE OF MANAGEMENT & TECHNOLOGY

Mumbai Office: 501A, Pinnacle Corporate Park, 5th Floor, Near Trade Center, BKC, Bandra East, Mumbai 400051.

London Office: Slikun School Of Business, Kemp House, 124, City Road, London EC1V 2NX

COMMON APPLICATION FORM

ALL PROGRAMS

Under the Aegis of



For all Queries, Mobile: +91 888 36 888 77

Admissions Committee

Admission@
slikuninstitute.org.in

Student Help Centre

Studentlms@
slikuninstitute.org.in

Business Enquiries

Business@
slikuninstitute.org.in

INSTRUCTIONS**ELIGIBILITY CRITERIA (For all MASTERS PROGRAMS)**

- Possess a Bachelor's Degree or equivalent of minimum 3 years duration.
- Should have a total professional experience of 2 years post graduation (not applicable for management quota seats).

DOCUMENTATION

Following documents must be submitted in the form of self-attested scanned copies during the time of admission:

- 10th standard mark-sheet.
- 12th standard or equivalent mark-sheet.
- Bachelor's degree or equivalent mark-sheets (all years) and certificate of passing.
- Bonafide certificate from the institution last attended.
- Migration Certificate from the University/Board (only for students outside India).
- Passport size photograph with white/red background (to be affixed on the next page).
- Caste certificate (if applicable).
- Experience proof for minimum 3 years of work experience. Appointment & Relieving letters for employed candidates. For candidates working as freelancers or owning businesses, business proofs such as invoices, client acknowledgement etc. must be submitted (1 document for every year of operation). Note: This document is necessary only for students applying for PGP and MiM programs.
- A copy of student's account details (cancelled cheque) if availing for scholarship program.
- Copy of Adhaar card and Pan Card.

FOR OFFICE USE ONLY

Sr. No.	Date	Receipt No.	Fee Payment Particulars	Signature of Accounts Dept.	Signature of Management
I					
II					
III					

Admissions Counselling Conducted By		Date:
Candidate Referred By		Date:
Admission Approved By		Date:
Remarks By the Management		
Date:	Signature	

APPLICATION NO: _____

PROGRAM CODE: _____

SCHOLARSHIP: YES NO

Affix Passport
Size Photo With
White/Red
Background

FILL IN BLOCK LETTERS ONLY

1	First name:	Last Name:
2	Mobile No:	Email ID:
3	Adhaar No.:	PAN No.:
4	DOB: <input type="text"/> <input type="text"/> <input type="text"/> (DD/MM/YYYY)	Place of Birth:
5	Nationality:	Mother Tongue:
6	Gender: Male: <input type="checkbox"/> Female: <input type="checkbox"/>	Blood Group:
7	Religion: Group: General: <input type="checkbox"/> Cat.I: <input type="checkbox"/> 2A: <input type="checkbox"/> 2B: <input type="checkbox"/> 3A: <input type="checkbox"/> SC: <input type="checkbox"/> ST: <input type="checkbox"/>	
8	Non Resident Indian: <input type="checkbox"/>	Foreigner: <input type="checkbox"/>
	Passport No.:	Visa valid upto:
9	Father's Full Name:	Occupation:
	Qualification:	
	Contact No.:	
10	Mother's Full Name:	Occupation:
	Qualification:	
	Contact No.:	
11	Present Address:	Pincode:
	Permanent Address:	Pincode:
13	Bank Details: Applicable only for scholarship students	
	Name of Bank:	
	Account No.:	
	IFSC Code:	

How Did You Come To Know About Slikun Institute Of Management & Technology:

Friends Relatives Colleagues Website Other _____

GRADUATION DETAILS:

Sr. No.	YEAR	% OBTAINED	CLASS	YEAR OF PASSING
1	I Year			
2	II Year			
3	III Year			
4	IV Year			

ACADEMIC RECORD:

EXAM	INSTITUTE NAME	UNIVERSITY/ BOARD	YEAR OF PASSING	% Obtained with Class
10 th Std				
12/PUC				
Diploma				

WORK/INDUSTRY EXPERIENCE: (Please mention the latest 3 only)

NAME OF THE ORGANIZATION	DESIGNATION	TENURE

DECLARATION: I hereby declare that all the particulars in the application form are true to the best of my knowledge and belief. I have read and understood all provisions of admissions and agree to abide by them. I also affirm that I fulfill the eligibility requirements for the course applied. In the event of submission of fraudulent, incorrect or untrue information or suppression or distortion of any necessary facts, I understand that my admission or certificate is liable for cancellation and in such an event, the management will in no way be held responsible for the same, and I am not liable to claim the fees already paid.

Date:

Applicant Signature

FINAL APPROVAL OF ADMISSION

The following student is approved on a provisional basis, to be admitted for the program subject to background verification of the particulars furnished.

Name of the Student: _____

Enrollment No: _____

Program Opted: _____

Date:

Place:

Final Approval By,

Authorized Signatory

