

Application Form for Post Graduate Diploma in Management 2021 - 23

IIRM

(A Joint Initiative of IRDAI and
Govt. of Telangana)

IIRM , Financial District, Gachibowli, Hyderabad-500032.
Tel: 040-23000005 | E-mail: admissions@iirmworld.org.in

Application No :

Admission Test Appeared:

CAT XAT

MAT CMAT

GMAT ATMA

Others Specify _____

Registration No :

Score :

Percentile :

Recent Photo
(Formals Only)

Personal Details

Name :

(Name should be entered as in your Matriculation / 10th Class Certificate)

E-mail Id :

Contact No. :

Date of Birth :

DD / MM / YYYY

Gender : Male

Female

Marital Status : Single

Married

Religion :

Aadhaar No. :

Caste / Group*:

Pan Card No. :

Father's Name :

Contact No. :

Occupation :

Organization :

Approx. Annual Income:

(Rs. Lakhs)

Mother's Name:

Contact No. :

Father's/ Mother's E-mail Id:

Permanent Address :

City :

State :

Pin :

Communication Address :

City :

State :

Pin :

* Required by AICTE

Educational Details (Start with highest Qualification)

Qualification	Name of the School / College	Board / University	Year		Aggregate Percentage	Class / Division / CGPA	Medium of Instruction
			From	To			

Name of the Institution / College last studied :

Academic & other Distinctions / Achievements / Extracurricular Activities

Work Experience (if any)

Company

From

To

Designation

List of Enclosures : (Copy of Certificates)

SSC / Matriculation / X Std.

Intermediate / PUC / XII Std.

Graduation / Degree

Score / Marks Card

Experience (if any)

Two Passport size Photographs

How did you come to know about IIRM

Specializations :

Your areas of interest in order of preference (Select Four)

- | | | |
|------------------------------------|---|---|
| <input type="checkbox"/> Insurance | <input type="checkbox"/> Risk Management | <input type="checkbox"/> Financial Services |
| <input type="checkbox"/> Finance | <input type="checkbox"/> Business Analytics | <input type="checkbox"/> Actuarial Science |
| <input type="checkbox"/> Marketing | <input type="checkbox"/> HRM | |

Institute reserves the right not to offer any of the specializations depending on the response.

Application Registration Amount :

Cash / DD of Rs. 500/- to be drawn in favor of Institute of Insurance and Risk Management, (Payable at Hyderabad)

Declaration by the Applicant :

I have carefully read the instructions and agree to abide by the decision of Institute regarding my selection to program. I certify that the information furnished in this application form is correct to the best of my knowledge and belief.

Date :

Place :

Signature of Applicant