

REGISTRATION FORM
M.B.A. (I Year)

Form Fee : Rs. 1,000/-

No. : 702

UPTU Code : 688



Devprayag Institute of Management

(Approved By AICTE, New Delhi & Affiliated to U.P. Technical University, Lucknow)

Devprayag Technical Campus, Phaphamau, Allahabad - 211 013 (U.P.)

Contact : 0532-2447789, 09956808612, 09335153868

City Office : Rastogi Dental Hospital and Research Centre, 1st Floor,
 14/20, T.B. Sapru Marg, Civil Lines, Allahabad - 211 001 (U.P.)

Web site : www.devprayag.ac.in E-mail : preetald@gmail.com

Sir,
 I hereby apply for registration for admission in **M.B.A. (I Year) Branch**.....
 for the session..... My application may please be considered if any seat is available as per
 U.P. Govt. / U.P. Technical University / College Rules.

(Affix your
 self attested
 recent
 photograph)

My Particulars are as under :

Name Mr./Ms.

Father's Name

Mother's Name

Date of Birth : DD MM YY Category (SC/ST/OBC/GENERAL/PH)

Nationality

Sex

Male

Female

Mailing Address

Permanent Address

Phone No.

Mobile No.

Email :

Educational Qualification (Attach Photocopies of Mark Sheets and Pass certificates)

Name of Examination	Board/University/Institute	Year of Passing	% Marks Obtained	% in PCM	Main Subject
High School					
Intermediate (10+2)					
Diploma					
B.Sc./B.Com./B.A.					
Any Other					

Entrance Examination Details

UPTU

Roll No. General Rank Category Rank

Any Other Test.....

Roll No. All India Rank State Rank

(Attach Photocopy of Rank Letter & Admit Card)

Accommodation (Hostel) :

Required

Not Required

Transport Request :

Required

Not Required

DECLARATION

I hereby declare that all the information given by me in this form is correct to the best of my knowledge and belief. I understand and agree that misrepresentation or omission of facts will justify the denial of admission, cancellation of admission or expulsion.

Date.....

Signature of Father/Guardian

Signature of Applicant

FOR OFFICE USE ONLY

Reference

**Admission Approved by
Chief Admin. Officer**