



Reg No.: _____
(To be filled by the office)

OSMANIA UNIVERSITY

HYDERABAD-500 007

Application for M.B.A. (Evening : Part-time) - 2010
(3 Years - 6 Semesters)

Last date for submitting the application to the Director, Directorate of Admissions, Osmania University, Hyderabad - 500 007 is **14. 08. 2010 by 4.00 p.m.**

Affix recent photograph & sign across the photograph (Do not pin/staple)

Downloaded applications must accompany a demand draft for Rs. 1000/- drawn in favour of "The Director, Directorate of Admissions, O.U., Hyderabad" towards the registration fee.

Note: The candidate should go through the information brochure before filling this form and ICR summary sheet in English.

Particulars of the Demand Draft for Downloaded application:

(Please write your name on the backside of the Demand Draft)

DD. No : Date : Amount :

Bank: Branch:

ICET - 2010													
H.T.No.							State Rank						

1. Name of the Candidate

2. Name of the Father/Mother :
(As per S.S.C. Marks Memo)

3. Date of Birth

D	D	M	M	Y	Y	Y	Y
				1	9		

4. Category (Put a ✓ mark)

SC	ST	BC-A	BC-B	BC-C	BC-D	BC-E	OTHERS

5. Residential status Local Non-Local 6. Sex Male Female

7. Minority Status (Put a ✓ mark)

Christian	Muslim	Linguistic	Others(Specify)

8. Name of the qualifying examination Passed (put a ✓ mark)

B.A.		B.Sc.		B.Com.		B.E./B.Tech.		Others	
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9. Percentage of marks secured in the qualifying examination B.A./B.Sc./B.Com./B.Tech./B.E./Others

Name of the Qualifying Examination	Aggregate % of Marks

10. Particulars of Employment after the graduation:

Name of the Company	Designation	Period of Service (From - To)	Place of Service

11. Address for Communication _____
in Block Letters _____

Pin Code Phone/Cell No. _____

12. Particulars of study of preceding seven (7) years starting from the qualifying examination.

Course/Class	Year of Study	School/College/University	Place and District

I hereby solemnly affirm that the above information is correct and I am aware that my admission is liable to be cancelled in case any information is found to be incorrect. I have gone through and understood the Rules, Regulations and Instructions for admission into M.B.A.(Evening) Part-time Programme.

Date: _____

Signature of the candidate

Please
Submit
to →

DIRECTOR
 Directorate of Admissions
 Near University Press
 Osmania University, Hyderabad - 500 007A.P.)

CHECK LIST

Submit the following alongwith this application:

1. Acknowledgement Card
2. Degree certificate or Provisional certificate of qualifying examination.
3. Xerox Copy of Hall Ticket and Rank Card-ICET-2010.
4. D.D. for Rs. 1000/-
5. Service Certificate(s) from the Employer
6. ICR Summary Sheet (not to be pinned or tagged to the application)

Application Number _____

OSMANIA UNIVERSITY, HYDERABAD

ACKNOWLEDGEMENT CARD

**M.B.A. (Evening : Part-time) Admissions - 2010
(3 Years - 6 Semesters)**

Your Registration Number is _____
(Quote this number for any future correspondence)

for Director
Directorate of Admissions, O.U.

Candidate's Address

_____ Pin Code _____

Affix
Rs. 6-00
Postage
here

From:

Director
Directorate of Admissions
Near University Press
Osmania University, Hyderabad - 500 007