

## APPLICATION FORM FOR MBA ADMISSION



### UNION CHRISTIAN COLLEGE, ALUVA

Reaccredited with 'A' Grade by NAAC

Website: [www.uccollege.edu.in](http://www.uccollege.edu.in) Email: [ucc@uccollege.edu.in](mailto:ucc@uccollege.edu.in)

### School of Management Studies(SMS)

(Approved by AICTE & Affiliated to M G University)

[www.uccollegemba.edu.in](http://www.uccollegemba.edu.in) Email: [mbastaffuc@gmail.com](mailto:mbastaffuc@gmail.com)

Ph: 7025207349

9388735011

**Application No:** 103

Name of the Applicant.....

Date of Birth..... Phone No.....

Email..... Blood group.....

Affix a recent  
passport size  
photograph

### Postal Address

Residential

For Communication

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.....Pin code.....

.....Pin code.....

Religion..... Community.....

General: ☐ OBC: ☐ OEC: ☐ SC/ST: ☐

Entrance Test Appeared: KMAT,CAT/CMAT/Any other national level test, Specify

Entrance Reg. No..... Score..... Percentage.....

Bachelor Degree: Passed/appeared Subject..... Percentage .....

### Parent/Guardian

Name

Phone No

Occupation & Organization

Father.....

Mother.....

Guardian.....

### Academic Details

Course, Institution, University/Board, Marks obtained (%)

X .....

XII .....

Degree.....

Any other ..... TC No..... Date of issue .....

**Work Experience**

Organization, Designation, Duration, Nature of work

.....  
.....

Mention your special skills/abilities/co-curricular interests:.....

.....  
.....

Do you want hostel accommodation: Yes/No

(Attach self attested copies of all relevant documents)

**Declaration by the Candidate**

This is to state, affirm and declare that I will abide by the rules and regulations of the college; that will do nothing wrong either inside or outside the college that will interfere with its administration, discipline and reputation; and that all information furnished in this application by me are to the best of my knowledge and belief.

Place:

Date:

Name &Signature of the applicant

Signature of the parent/guardian

.....

**For office use**

Verified

Admitted/rejected

Signature of the Principal/Director

Date: .....