



Office of the Director Admissions

University of Kashmir

Hazratbal, Srinagar-190 006

www.kashmiruniversity.ac.in, www.kashmiruniversity.net

Dated: _____

IMBA Admission – 2018

Counselling Form for IMBA

(Applicants who have applied for admission to the programme under **Self Financed Seat quota only**)

To be filled by the candidate and submit by him/her personally on 17th September-2018 in the office of the Director, Admissions, University of Kashmir. The preferences given shall be final and no change shall be entertained later on.

Name of the Candidate: _____

12th Marks (% age): _____

Phone/Mobile Number: _____

ENT Form No. _____
Total Score _____
Category: _____

Campus/College Preferences:

Sr.	Name of the Institution	Programme	Preference
1	Department of Management Studies, University of Kashmir	IMBA	
2	North Campus, Baramulla	IMBA	

If already admitted

Yes	No
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Whether fee deposite

Yes	No
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If yes, mention Institute: _____

Category: : _____

Course : _____

Signature of the Candidate

(For Office Use Only)

Remarks:

Whether Admitted/Upgraded/Shifted: _____

Programme: _____