

INDIAN INSTITUTE OF MANAGEMENT CALCUTTA
INDIAN INSTITUTE OF TECHNOLOGY KANPUR
INDIAN INSTITUTE OF TECHNOLOGY MADRAS

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APPLICATION FORM FOR ADMISSION TO

Post Graduate Program for Executives for Visionary Leadership in Manufacturing
(Session 2010-11)

1. PERSONAL INFORMATION

Name of the Candidate _____
(as recorded in the School Leaving Certificate):

Date of Birth (DD/MM/YY):
(as it recorded in the School Leaving Certificate or birth certificate):

Caste: Gen SC ST OBC

(If OBC, SC or ST please attach attested copy of necessary certificate from competent authority)

Nationality: Indian Other

Gender: Male Female

Marital Status: Single Married

Parents' Name: Father _____

Mother _____

Husband's/Wife's Name _____
(for married applicant)

Applicant's Passport No.

Place of Issue:

Date of Issue:

Valid upto:

(Since study visit abroad is compulsory part of the programme, attested copy of the passport must be submitted with the application/before registration)

2. ADDRESS:

Permanent Address

Address _____

City _____ Postal Code _____ State _____

Fax _____ Mobile _____ Phone _____

Email 1 _____ Email 2 _____

Present Address (at which correspondence to be sent)

Address _____

City _____ Postal Code _____ State _____

Fax _____ Mobile _____ Phone _____

Email 1 _____ Email 2 _____

3. APPLICATION FEE

(Non refundable) fee of Rs. 2,500/- by Demand Draft/Banker's Cheque drawn in favour of "Indian Institute of Management Calcutta" payable at Kolkata on account of application of fee: Particulars of D.D/ bankers Cheque enclosed

DD/Banker's Cheque No _____ Date _____

Issuing Bank Name/Branch _____

(Please write your name at the back of the Banker's Cheque /Demand Draft)

4. FUNDING OF PROGRAMME: Please give details of how you propose to pay for the course: Company Sponsorship/ Bank Loan/ Own Sources/ Others (please specify) _____

5. CATEGORY OF APPLICATION (please tick in the appropriate box.)
(a) Self Sponsored: (b) Sponsored: (c) Study Leave:

Self Sponsred

(a) "self sponsored" Candidate applying under self sponsored category must submit attested copy of the relieving certificate from last employer and produce the original thereof on or before registration.

Sponsored

(b) Candidates applying under sponsored category must submit attested copy of the of letter/bond from the employers giving details of terms & conditions and extent of sponsorship and produce the original thereof on or before registration.

Study leave

(c) Candidates applying under study leave category must produce the document pertaining to sanction of leave from the employers and extent of study leave and submit attested photo copy of the same on or before registration.

6. ACADEMIC QUALIFICATIONS

a. **Secondary** (Class 10 or equivalent) School Examination. Please attach attested copies of marks sheet & certificate of examination passed.

| Institute | Board | Examination passed | Year of passing | GPA /percentage | Class/ Division/Rank |
|-----------|-------|--------------------|-----------------|-----------------|----------------------|
| | | | | | |

b. **Higher Secondary** (Class 12 or equivalent) School Examination. Please attach attested copies of marks sheet & certificate of examination passed.

| Institute | Board | Examination passed | Year of passing | GPA /percentage | Class/ Division/Rank |
|-----------|-------|--------------------|-----------------|-----------------|----------------------|
| | | | | | |

c. **Engineering Degree**. Please attach attested copies of marks sheet & certificate of examination passed.

| Institute | University | Date | | Percentage | Rank/ Division | Branch |
|-----------|------------|------|----|----------------------|----------------|--------|
| | | From | To | | | |
| | | | | 1 st Year | | |
| | | | | 2 nd Year | | |
| | | | | 3 rd Year | | |
| | | | | 4 th Year | | |
| | | | | Aggregate | | |
| | | | | of 1-4 Years | | |

Whether you have passed any subject in more than one attempt? Yes/No

If Yes, please indicate the subjects_____

d. **Masters Degree** or other Post Graduate Degree. Please attach attested copies of marks sheet & certificate of examination passed.

| Institute | University | Date | | Percentage | Specialisation | |
|-----------|------------|------|----|------------|----------------|-------|
| | | From | To | | Major | Minor |
| | | | | | | |

e. **Additional Masters Degree** or other Post Graduate Degree. Please attach self attested copies of transcripts of examinations passed.

| Institute | University | Date | | Percentage | Specialization | |
|-----------|------------|------|----|------------|----------------|-------|
| | | From | To | | Major | Minor |
| | | | | | | |

7. TEST SCORES (If Available)

(A) GMAT (Graduate Management Admissions Test) Score:

Registration Number_____ Test Date_____

Verbal Score_____ Percentile_____

Quantitative Score_____ Percentile_____

Total Score_____ Percentile_____

Analytical Writing Score_____ Percentile_____

(B) GRE (Graduate Record Examinations) Score:

Registration Number_____ Test Date_____

Verbal Reasoning Score_____ Percentile_____

Quantitative Reasoning Score_____ Percentile_____

Total Score _____ Percentile _____

8. WORK EXPERIENCE (only full time experience to be considered)

a. Aggregate work experience (in completed years and months as on 31st March 2010)

_____ Years _____ Months (attach supporting documents)

b. Current Employer

Name of Company _____

Address _____

City _____ Postal Code _____ State & Country _____ Fax : _____

Tel _____ Company website _____ Email _____

Main field of activity _____

Number of employees _____ Annual Sales (in INR) _____

c. Your current responsibilities

Job Title _____ Number of years in this position _____

Brief description of business _____

Responsibilities: Please give a description of your exact job, including nature of work, major responsibilities (if possible, draw an organization chart and give your job description. Use extra sheet if necessary)

Number of people managed _____

Assets under your management _____

d. Contact details of current employer:

Name _____ Designation _____

Postal Address _____

Email _____ Phone _____ Fax _____

Mobile _____

e. Is your employee prepared to provide you with facilities/access to undertake in-company project during the final months of program? Yes/No/to be confirmed

- f. Career Summary:
 (Please provide chronological details of your work experience in the table below.
 List your present position first.)

| Name of Organization | Joining Date | Leaving Date | Duration | Designation/ responsibility | Reasons for leaving |
|----------------------|--------------|--------------|----------|--------------------------------|---------------------|
| | | | | | |
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| | | | | | |

- g. Give detailed descriptions of three activities you performed in your workplace in the last five years which will help us assess your abilities and strengths. Use extra sheets if necessary.

- h. Narrate an important/unusual incident of your life when you had to face a very demanding/challenging situation. How did you overcome the situation? What lessons did you learn from this incident? Use extra sheets if necessary.

9. **ACTIVITIES AND INTERESTS:**

Please list in order of importance, any extra-curricular activities in which you are/have been involved (sports, community activities, hobbies etc)

| Activity | Duration | Level of involvement/ achievements |
|----------|----------|---------------------------------------|
| | | |

10. **LETTER OF RECOMMENDATION from employer** in prescribed form is to be submitted separately in sealed envelope along with application material within the application submission deadline date.

11. **Last date of receiving of Application:**

Last date of receiving duly filled application form along with recommendation letter, required documents and application fee in Demand Draft/Banker's Cheque drawn in favour of **"Indian Institute of Management Calcutta"** payable at **Calcutta** to the following address is **23rd December 2009, Wednesday.**

**Chairman, PGPEX-VLM
VLMP Office
Indian Institute of
Management Calcutta
D H Road, Joka
Kolkata 700104.**

Form of recommendation letter:

LETTER OF RECOMMENDATION

Section to be completed by applicant

Name _____ Signature _____

Section to be completed by referee

Based on your experience, rate the applicant in the following areas vis-à-vis persons of similar academic and professional standing:

| | Truly exceptional top 2% | Exceptional top 10% | Very Good Top 25% | Good middle 50% | Below Average lower 25% | Unable to judge |
|---|------------------------------------|-------------------------------|-----------------------------|---------------------------|-----------------------------------|------------------------|
| Initiative | | | | | | |
| Flexibility | | | | | | |
| Maturity compared to peers | | | | | | |
| Oral communication Skills | | | | | | |
| Written communication Skills | | | | | | |
| Ability to work with others | | | | | | |
| Ability to accept constructive feedback and learn from it | | | | | | |
| Ability to understand others viewpoints | | | | | | |
| Ability to complete work in time | | | | | | |
| Self confidence | | | | | | |
| Leadership | | | | | | |

Please include any material you believe is relevant.

How long have you known the applicant and in what capacity:

Any other comments:

Name _____ Signature (with date) _____

Designation _____

Name of the Organization:

Note:

The recommendation letter in the prescribed form should be submitted by applicant in envelope sealed by the issuing authority before handing over to the applicant, candidate.