

## MAHARASHTRA TECHNICAL EDUCATION SOCIETY'S

## School of Management Dhondumama Medical Campus off Karve Road, Pune-411004 of Tilak Maharashtra Vidyapeeth

(Established u/s 3 of UGC Act 1956, V.N.NO.F9-19/85-U-3 dt.24/04/1987 by Govt. of India)

APPLICATION FOR ADMISSION					
MBA (Hospital and	for Healthcare	Manad	aeme	nt)	
	2016-18		,	,	
To, The Director School of Management Karve Road Pune.					
Respected Sir,					
l am seeking admission for MBA (Hospital and	d Healthcare Man	agement).			
My personal details are as follows,					
1. Full Name:					
Surname First Name	Father's/ Hu	ısband's N	ame	Mother'	s name
2. Permanent Address					
Pin Code:					
3. Tel. No. :	4. Mobile No.:				
5. E-mail:					
6. Gender: Please Tick (v) Male Fen	nale				
7. Religion: 8	.Caste:	SC	ST	OBC	NT
		SBC	VJNT	OTHER	OPEN
					-
9. Marital Status: Married		Jnmarried			
10. Date of Birth: DD/MM/YYYY	1	1. Blood G	roup		
12. Religion :					
13. Place of Birth					
Place	State			Country	/
14. Nationality:					

15. Father's / Husband's Name	
15. Father's / Husband's Name	

## 16. Educational Details:

Mention all Board / University examinations that you have passed from.

Course	Name of College/Institute	Board/University	Year	% Marks	Special/Optional subjects
1.	S.S.C				
2.	H.S.C				
3.	Final Exam				
4.					

Date:	Signature of the Candidate:	
Place:		
Entrance exam: Date	For office use only	
Passed: Yes / No	Admitted : Yes / No	
Ref. Register page no.	Authorized Signature	

For further information contact:

## School Of Management

2<sup>nd</sup> Floor Management Wing, Sanjeevan Hospital Campus,

23 Off Karve Road, Erandwana Pune-411004.

Tel .No.: (020) 25437625 Mob.: 9921613752

Website: www. mtespune.org Email: mbaoffice@mtespune.org