

# APPLICATION FORM



<b>Instructions to fill the Application Form:</b> Write in English and CAPITAL LETTERS. Use only Blue / Black Ball point Pen. Use of Green / Red Pen and Pencil is prohibited. Fill one character per box leaving a blank box between two words. Do not write outside the boxes. DO NOT USE PHOTOCOPY OF THIS FORM. Forms should be sent to - The Admissions Incharge, BSE Institute Limited (BIL), 18th & 19th Floor, P.J. Towers, Dalal Street, Mumbai - 400001	<b>FORM NO.</b>  <b>AEP No.:</b> _____
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**Course Applied for:**

Senior Leadership Series The CIO Program

PASTE AND SIGN ACROSS YOUR RECENT  
PASSPORT SIZE COLORED PHOTOGRAPH  
(with white background)

DONOT STAPLE / PIN THE PHOTOGRAPH

<b>Payment Details</b>	
<b>a) Online Transaction Details</b>	
Online Transaction Number	<input style="width: 100%;" type="text"/>
<b>b) Demand Draft Details</b>	
D/D Number	<input style="width: 100%;" type="text"/>
D/D Date	<input style="width: 100%;" type="text"/>
D/D Amount	<input style="width: 100%;" type="text"/>
Bank Name	<input style="width: 100%;" type="text"/>

**1 Applicant's Name (do not write Shri/Mr./Dr. etc.)**

<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
(First Name)	(Middle Name)	(Surname)

**2 Father's/Husband's Name (do not write Shri/Mr./Dr. etc.)**

<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
(First Name)	(Middle Name)	(Surname)

**3 (a) Address for Correspondence:** House/ Flat No. Building, Street/Village/Mohalla (do no write Father's Or your name here)

<input style="width: 100%; height: 20px;" type="text"/>
<input style="width: 100%; height: 20px;" type="text"/>

<b>City</b> <input style="width: 100%;" type="text"/>	<b>District</b> <input style="width: 100%;" type="text"/>
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<b>State</b> <input style="width: 100%;" type="text"/>	<b>Pin Code</b> <input style="width: 100%;" type="text"/>
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**3 (b) Telephone Number (with STD code)**

0	<input style="width: 90%;" type="text"/>
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**3 (c) Mobile Number**

0	<input style="width: 90%;" type="text"/>
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**3 (d) E-mail ID**

<input style="width: 100%;" type="text"/>
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**4 Gender: Cross (X) the appropriate box**

Male     Female

**5 Date of birth**

<input style="width: 100%;" type="text"/>	/	<input style="width: 100%;" type="text"/>	/	<input style="width: 100%;" type="text"/>
Date		Month		Year

**6 Nationality: Cross (X) appropriate box**

Indian     Other

Specify, if other: \_\_\_\_\_

**7 Marital Status: Cross (X) the appropriate box**

Married     Divorced     Widowed     Unmarried

**8 (a) Educational Qualifications (Please refer to 'Checklist' for attachments)**

Year of graduation	<input style="width: 100%;" type="text"/>	Percentage of marks	<input style="width: 100%;" type="text"/>
Name of College	<input style="width: 100%;" type="text"/>	Name of University	<input style="width: 100%;" type="text"/>

**8 (b) Stream: Cross (X) the appropriate box**

	Science	Arts	Commerce	Engineering	Others
Graduate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Post Graduate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Specify, if others	<input style="width: 100%;" type="text"/>				

<b>9 Work Experience</b>			
Duration in	Years	[ ]	and Months
		[ ]	
Present Company	[ ]		Designation
	[ ]		[ ]
Employed in (cross (X) the appropriate box)			
<input type="checkbox"/> Govt./Public Sector	<input type="checkbox"/> Semi Govt.	<input type="checkbox"/> Pvt. Sector	<input type="checkbox"/> Self Employed
Annual Family Income (Cross (X) the appropriate box)			
<input type="checkbox"/> Upto Rs. 2 lac	<input type="checkbox"/> 2 lac to 5 lac	<input type="checkbox"/> 5 lac to 15 lac	<input type="checkbox"/> Above 15 lac

**10 Attested photostat of submitted documents (Please list the documents attached with the form):**

- |         |          |
|---------|----------|
| 1 _____ | 8 _____  |
| 2 _____ | 9 _____  |
| 3 _____ | 10 _____ |
| 4 _____ | 11 _____ |
| 5 _____ | 12 _____ |
| 6 _____ | 13 _____ |
| 7 _____ | 14 _____ |

**DECLARATION BY APPLICANT**

I hereby declare that I have read and understood the conditions of eligibility for the program for which I seek admission. I fulfill the minimum eligibility criteria and have provided necessary information in this regard. In the event of any information being found incorrect or misleading, my candidature shall be liable to cancellation by BIL at anytime and I shall not be entitled to refund of any fee paid by me to BIL.

I would like BIL to update me on the new products and services.

I have carefully studied the rules of BIL as printed in the prospectus and I accept them and shall not raise any dispute over the same rules.

Date: [ ] [ ] / [ ] [ ] / [ ] [ ] [ ] [ ]  
Date      Month      Year

Signature of candidate