

## APPLICATION FORM



मनुष्यवती भूमिरर्थः

**APPLICATION FORM  
POST GRADUATE DIPLOMA IN MANAGEMENT  
(FINANCIAL MANAGEMENT)  
PGDM (FM) PROGRAM 2010-12  
(To reach latest by February 26, 2010)**

Affix recent  
passport size photograph  
(self attested)

### TO BE FILLED IN BY THE APPLICANT

Name						
Male (Tick) <input type="checkbox"/>	Female (Tick) <input type="checkbox"/>	Age in Years <input type="text"/>	Date of Birth			
			DD	MM	YY	
Designation						
Organization						
City	Country	PIN	Phone (O)	Phone (R)	Email	Fax

#### Educational Qualification (Graduation onwards)

SI	Qualification	University	Year of Passing	Specialization	% Marks

#### Work Experience : (Starting with your present position)

SI	Post held & Scale of Pay	Organisation	From	To	Job Profile

Certified that the information furnished above is correct.

I undertake to declare that upon my admission to PGDM (FM) programme conducted by NIFM, I would abide by rules and regulations governing the conduct of the programme.

*Signature of the Applicant*

*Continued .....*

TO BE FILLED BY THE SPONSOR (Wherever applicable)

Name of the Sponsor	
Designation	
Organization	
Address for communication	
City	
Country	
PIN	
Phone (O) (R)	
Email	
Fax	

This organization undertakes to declare that upon the admission of the candidate to PGDM (FM) programme conducted by NIFM the participant would abide by rules and regulations governing the conduct of the programme.

Date

*Signature of the Sponsor  
& Stamp of the Organization*

Please return the completed form to Dr. A.K. Sharan, Program Coordinator, PGDM (FM)

**NATIONAL INSTITUTE OF FINANCIAL MANAGEMENT**  
Sector-48, Pali Road, Faridabad 121 001, Haryana (INDIA)  
Telephones. (EPABX) : 2418857/75. Fax: 0129-2418879/2418867  
(Dial code 0129 from Delhi and other stations)

# APPLICATION FORM

## HALL TICKET

Affix recent  
Passport size  
photograph  
(Self Attested)

Post Graduate Diploma In Management (Financial Management)  
2010-12

TO BE DETACHED BEFORE SUBMITTING THE APPLICATION FORM  
PLEASE BRING THE HALL TICKET AT THE TIME OF GROUP DISCUSSIONS

Name of Applicant: .....

Date of Birth: .....

Address for Correspondence: .....

Application Form No.: .....

Demand Draft/Pay Order No.: .....

*[only where the form has been downloaded from NIFM website]*

Signature of Applicant