

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 2011-12)

1. PERSONAL INFORMATION

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

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

Nationality: Indian Other

Gender: Male Female

Marital Status: Single Married

Parents' Name: Father _____

Mother _____

Husband's/Wife's Name _____
(In case of 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. Correspondence Address

City _____ Postal Code _____ State _____

Fax _____ Mobile _____ Phone _____

Email 1 _____ Email 2 _____

3. Permanent Address

Address _____

City _____ Postal Code _____ State _____

3. APPLICATION FEE

(Non refundable) fee of **Rs. 2,500/-** by Demand Draft/Banker's Cheque drawn in favour of '**Indian Institute of Technology Kanpur** payable at **Kanpur** 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- will resign**

(b) **Self Sponsored- on study leave**

(c) **Sponsored**

(a) **"Self sponsored – will resign"** In case of candidates who plan to resign from service, letter of resignation and release from last employer is to be produced in original on or before registration.

(b) **"Self sponsored – on study leave"** Candidate in service applying under self sponsored category must submit with the application form, attested copy of the application for study leave bearing sign and seal of receipt of the employer along with letter or endorsement of consent of the employer on the application.

(c) **"Sponsored"** Candidates applying under sponsored category must submit letter of intent of sponsorship issued by the employer with the application form and submit attested copy of letter/bond from the employers containing the details of terms & conditions and extent of sponsorship 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		

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 (Not mandatory, please provide 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 2011)

_____ 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 employer 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 (Years and Months)	Designation/ responsibility	Reasons for leaving

- 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 faced? 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

(Full Signature of Candidate)

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 favor of **'Indian Institute of Technology Kanpur'** payable at **Kanpur** to the following address by **November 19, 2010:**

**VLFM Office
Department of Industrial & Management Engineering
Indian institute of Technology Kanpur
Kanpur- 208 016, UP**

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.