LLOYD GROUP OF INSTITUTIONS

Ladder Of Success

Plot No. 11, Knowledge Park-2, Greater Noida

Email lloydadmissions@lloydcollege.in | www.lloydmanagement.edu.in/

REGISTRATION CUM ADMISSION FORM

1. Please fill the formneatly
2. Incomplete form will not beaccepted

Reg.No.:_____

Master of Business Administration (MBA)

Affiliated to AKTU Approved by & AICTE, Ministry of HRD, Govt. of India, New Delhi

College Code:_____ **College Code:**_____

Affix your recent passport size colour photograph

EntranceExam.

CAT ☐ Score...../Percentile.....

MAT ☐ Score...../Percentile.....

XAT ☐ Score...../Percentile.....

CMAT ☐ Score...../Percentile.....

Branch Appliedfor

Marketing ☐ IT ☐

Finance ☐ IB ☐

HR ☐ Operations ☐

PERSONAL DETAILS OF STUDENT

Name of the Student in Full (Block Letters):

FIRSTNAME MIDDLENAME LASTNAME

Permanent Address

State: PIN:

Res. Telephone No. (WithSTDcode) MobileNo.

Correspondence Address (if different from above)

State: PIN: Mobile No.

E-mail ID :

Nationality: MaritalStatus: Gender:

Married ☐ Single ☐ Male ☐ Female ☐

Date of Birth:dd mm yyyy State of Domicile:

Religion:

Category: Gen ☐ SC/ST/OBC ☐ Others ☐

ACADEMIC QUALIFICATION

Name of Exam.	Board / University	Year	Regular/Private/ Distance Education Mode	Subjects	Percentage (%)
High School / Secondary					
Intermediate / Sr. Secondary					
Graduation Specify:					
Any Other Specify:					

Attested photocopies of all certificates to be attached. *Student appearing for their qualifying exams may write " Result Awaited"

Have you ever been expelled from any School / College / Institution ? Yes / No

If Yes, then give the details: _____

DETAILS OF PARENT / GUARDIAN

Name of Father in Full (Block Letters):

Occupation

Designation

Name of Organization

Address of the Organization

City:

State:

PIN:

Off. Telephone No. (With STD code)

Father Mobile No.

Annual Income (appx.)

E-mail ID:

Name of Mother in Full (Block Letters):

Occupation

E-mail ID:*

Details of Brother(s) / Sister(s) / any other Blood Relation studying/has studied at Lloyd College (if any):

Name:

Course:

LOCAL GUARDIAN DETAILS

Name in Full (Block

Letters):Address:

City:

*to update you about the Institute

State

PIN:

Telephone No. (With STD code)

Mobile No.

E-mail ID:

Relation with the Applicant:

Would you like to avail facilities from the institute:

Laptop	Yes ☐	No ☐	Study Tour	Yes ☐	No ☐
Study Material	Yes ☐	No ☐	Additional Courses	Yes ☐	No ☐
Transport	Yes ☐	No ☐	Hostel	Yes ☐	No ☐

Work Experience Details

Organization & Address

Designation

Duration ofworkfrom to

Job profile:.....

.....

.....

DECLARATION BY THE STUDENT

- I hereby declare that I have read and understood all the rules and regulations of the Institute. I will fully abide by the rules and regulations of the Institute during the course of my studies, otherwise my admission can be cancelled or any other disciplinary action can be taken against me.
- I hereby declare that the particulars stated above are true to the best of my knowledge and belief.
- The admission is purely provisional subject to fulfillment and verification of all the certificate and students made by me in the admission from and in compliance with the AKTU & AICTE requirements. In case my admission is not approved or cancelled by the Competent Authorities, then the Institute will not be liable for the same and I will not claim any fee refund.
- I understand that I have to pay my fees as per the Institute's schedule or I can be debarded from exams/placements opportunities. I shall not claim a refund of registration fee at anytime.

Date **Signature of Student**

DECLARATION BY THE PARENT / GUARDIAN

I,Mr./Ms.....F/o/M/o/G/oassuresthatmyward. ..... willstrictly abide by the rules and regulations of the institute during the period of his / her studies, otherwise his / her admission can be cancelled, and / or any other disciplinary action by the authorities of the institute will be acceptable tome.

Date **Signature of Father / Mother / Local Guardian**

ORDER OF THE DIRECTOR ADMISSIONS

Provisional registration / admission to Mr. / Ms.....in.....(course)is granted, subject to the submission of all the certificates and fee required as per the rules and the final approval of the concerned university.

Date **Director Admissions**

UNDERTAKING BY THE STUDENT

I.....S/o / D/o.....
R/o.....have taken provisional admission at LLOYD. Gr. Noida in.....course for the academic session.....I hereby undertake that I will produce my proof of qualifying examination as required by the institute by.....In case, I will not produce my proof of qualifying examination by the stipulated time, my candidature may be considered null and void and I shall not claim any refund of fee / registration amount deposited by me.

How did you come to know about LLOYD and its admission process?

- ☐ Through prospectus ofCAT/XAT/MAT/CMATetc.
- ☐ Throughmassmedia/magazine/electronic
- ☐ Through friends andrelatives
- ☐ ThroughastudentofLLOYD
- ☐ ThroughCoachingCenter/CareerConsultant.....

Signature of Father / Mother / Local Guardian **Signature of Student**

Verified by: (Admission officer) .....

ESSAY WRITING:

Write in 100-150 words the reason why you want to persue management higher education, and how will it help in achieving your goal in life?

DOCUMENTS CHECKLIST

Ensure you have attached the photocopy of following documents copies before submitting your applicationform:

	✓	✗
1. Four Passport size Photographs		
2. Certificate and Mark Sheet of10th		
3. Certificate and Mark Sheet of12th		
4. Bachelor's Degree and MarkSheet		
5. Cast Document		
6. Migration		
7. Aadhar Card		
8. Address Proof (Passport / Pan Card)		
9. CAT / MAT / XAT /(Scorecard)		
11. Experience letter, if applicant has worked for more than one year.		

Documents verification

Submittedby:

Student's Name,
Signature & Date

Received by:

Admission Manager's Name,
Signature & Date

Verified by

What are your two strengths and weaknesses? Please Explain

Strengths:

1.

2.

Weaknesses:

1.

2.

Evaluation Sheet - **Date:**

STUDENTNAME	**SPECIALIZATIONS APPLIEDFOR:**

GROUP DISCUSSION

___/20

WRITTEN TEST/ ONLINE TEST (L MAT)

___/30

Faculty1(Name)_____ **Faculty 2(Name)_____**

PANEL ROUND

PARAMETERS	**MARKS**	**FACULTY 1**	**FACULTY 2**	**REMARKS**
Personality	5			
Clarity of Goals	5			
General Awareness	5			
Academic Knowledge	5			
Communication Skills	5			
Body Language	5			

FINAL ROUND/ DIRECTOR'S ROUND

PARAMETERS	**MARKS**	**REMARKS**
Personality	5	
Clarity of Goals	5	
General Awareness	10	
Academic Knowledge	10	
Communication Skills	10	

RECOMMENDATION **SIGNATURE:**

TOTALSCORE	**_____/150**