



Government of Maharashtra's
SYDENHAM INSTITUTE OF MANAGEMENT
STUDIES, RESEARCH AND ENTREPRENEURSHIP
EDUCATION, (SIMSREE) B-ROAD, CHURCHGATE,
MUMBAI – 400 020.

Contact no.:- (022) 61510701 www.simsree.org



CAP ADMISSION FORM, AY 2023-24

ADMISSION TO FIRST YEAR OF MMS COURSE, BATCH : 2023-25.

(General / Reserved): (Specify) _____

Date of reporting to the Institute : _____ Cap Round : (I / II / III / ACAP): (Specify) _____

Payment Details

1) Transaction ID: _____ Date : _____ Amount _____ Bank _____

2) Transaction ID: _____ Date : _____ Amount _____ Bank _____

For Office Use Only :

Fee Receipt No.1) _____ Date : _____ Amount: _____

Fee Receipt No. 2) _____ Date: _____ Amount : _____

Fees taken by: _____ Documents Checked by: _____ Confirmed by _____

To be Filled by the Candidate :

Application Id: _____ Adhar Card No. :- _____

Merit Score : _____ Merit No.: _____ Category : _____

Seat Type : _____

Candidate's Full Name : _____

Surname : _____

First Name : _____

Father Name / Husband's Name : _____

Sex : Male / Female Married / Single Blood Group: _____

Nationality _____ Religion _____ Caste : _____ Sub Caste : _____

Date of Birth (DD/MM/YYYY) _____ (in words) _____

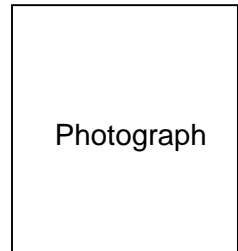
MOTHER TONGUE _____ Native Place : _____

Place of Birth _____ Village / Town : _____ Taluka _____

Permanent Address _____

Present Address : (For Correspondence) : _____

Telephone No.: _____ Mobile : _____ E-m ail Id : _____



DETAILS OF EDUCATIONAL QUALIFICATIONS :

S.S.C. (or Equivalent) Exam Board : _____

Month & Year of Passing _____ Aggregate Marks Obtained _____ out of _____

H.S.C. (or Equivalent) Exam Board : _____

Month & Year of Passing _____ Aggregate Marks Obtained _____ out of _____

Graduation (B.A., B.Sc., B.Com., B. Tech., B.E.) or any other Equivalent Qualifying Exam) : _____

University Name : _____

Name & Address of College : _____

Month & Year of Passing _____ Aggregate marks _____ Out of _____

(In case of awaited result, provisional certificate from Registrar / Principal to be attached)

Post Graduation Exam (if any): _____

Post Graduation University: _____

Name & Address of College _____

Month & year of passing _____ Aggregate marks obtained _____ out of _____

(In case of awaited result, provisional certificate from Registrar / Principal to be attached)

<u>Father's Details</u>	<u>Mother's Details</u>
Father's Name: _____	Mother's Name _____
Occupation : _____	_____
Designation : _____	_____
Office Name : _____	_____
Address: _____	_____
_____	_____
Mobile No. _____	_____
E-mail Id: _____	_____

Local Guardian's Name : _____ Contact No. _____
(Mobile no.)

Occupation of Father :- Service / Business / Professional / Farmer / Labourer / Retired
(Strike out which is not applicable)

Annual Income of Guardian / Parent : _____

Declaration

I _____, declared that I have read all the rules in the Information brochure for the current year and with full understanding of these rules, I have filled in this application form for admission to current year. The information given by me in this application is true to the best of my knowledge and belief. I have not been debarred from appearing at any examination held by any Government constituted or Statutory examination authority in India. I hereby agree to conform to any rules, acts and laws enforced by Government and the University and I hereby undertake that so long as I am a student of this Institute I will do nothing either inside or outside the Institute, which may result in disciplinary action against me under the rules, acts and laws. I fully understand that the Director of the Institute will have full liberty to expel / rusticate me from the Institute for having Lecture Attendance less than 75 % or of any infringement Rules of Conduct and Discipline prescribed by the Institute / University. I fully understand that in case I apply for cancellation of admission, refund of fees will be as per the rules of refund notified in the Information brochure. **I fully understand that smoking, drinking of alcoholic beverages, chewing of paan or gutka or ragging in college premises is strictly prohibited. Strict action will be taken against those who break the above rules and regulations.**

Each SET should contain all the following documents as per the order of sequence (as applicable) - Put()

1. F C Acknowledgement & Seat Acceptance Letter	13. Migration Certificate for Other Universities students
2. Allotment Letter showing (Admitted at SIMSREE)	14. GAP Certificate
3. Score Card through which you are admitted at SIMSREE MHCET / CMAT / CAT / MAT / ATMA ? _____	15. Anti Ragging Affidavit from Student & Parent
4. SSC Marksheet	16. Caste Certificate
5. HSC Marksheet / All Diploma Marksheet OR Diploma Certificate (as applicable)	17. Caste Validity Certificate
6. Graduation Marksheet (All Semesters / _____ Year)	18. Non Creamy Layer Certificate
7. Provisional Passing Certificate OR Degree Certificate	19. Photocopy of Adhar Card
8. Post Graduate (PG) Marksheet (if any)	20. PH Certificate specify _____
9. PG Provisional Passing Certificate OR Degree Certificate (if any)	21. EWS / TFWS Certificate
10. Domicile Cert./ Birth Cert./ School Leaving Cert. (as per FC Confirmation Document List)	22. Income Certificate for EWS / TFWS .(as per FC confirmation document List)
11. Nationality Certificate (Birth Cert./ School Leaving Cert./ Nationality Cert./ Domicile Cert. (as per FC confirmation document List))	23. Photograph (4)
12. Leaving Certificate / Transference Certificate of Last Qualifying Exam	24. Miscellaneous (if any) / Proforma / Cert. Specify _____

Date : _____

Place :- _____

Name & Signature of the Candidate

Signature of the Parents/Guardian

CANDIDATE UNDERTAKING

To,
The Director,
SIMSREE,
Mumbai 400 020.

Sub : M.M.S. Admission 2023-2025 Batch.

Sir,

I hereby declare that I fully know that my admission to the MMS Course for 2023-2025 batch in this Institute is **Provisional** subject to the rules of eligibility of the University of Mumbai and final approval by the University of Mumbai.

I understand that the Provisional Admission will automatically stand cancelled IF:

1. I fail to obtain the **Provisional Eligibility Certificate / Transference Certificate / Leaving Certificate / Migration Certificate** on or before 15th September, 2023 or if I fail to produce a passing Certificate and Statement of marks of the qualifying examination on or before 15th September, 2023.
2. I fail to obtain **50% marks in aggregate or equivalent CGPA (45% in case of candidates of backward class categories** and Persons with Disability belonging to Maharashtra State only) in the qualifying degree examination at one and the same sitting at the session mentioned in the application.
3. I fail to produce the **Caste Certificate** issued by the Competent Authority
4. I fail to produce the **Caste Validity** issued by the Competent Authority as per the schedule specified by State CET Cell
5. I fail to produce the **Non-Creamy Layer Certificate** issued by the Competent Authority as per the schedule specified by State CET Cell.
6. I fail to produce the **PH Certificate** _____ issued by the Competent Authority.

I hereby give a solemn undertaking that I shall abide by the rules of the Institute and of the University and that should the University or the Institute cancel my admission for any of the above reasons I shall not hold the Institute responsible for the provisional admission and shall not claim any damages.

NAME :- _____

Yours faithfully,

APPLICATION ID :- _____

(Candidate Signature)

Declaration to be signed by the Parent

I _____, declare that the particulars furnished by my son / daughter / ward in the application form are correct to the best of my knowledge. I undertake and bind myself to pay on behalf of my son / daughter / ward such fees, charges etc., approved by the Shikshan Shulk Samiti or any other authority appointed by the Government of Maharashtra and any other fees which the Government of Maharashtra / University of Mumbai may levy from time to time by due date and in the event of failure on my part and / or on the part of my son/daughter/ward, the Director of the Institute may take such action against my son / daughter/ward, the Director of the Institute may take such action against my son/daughter/ward, as he / she may deem fit. **I FULLY UNDERSTAND AND THAT IN CASE MY WARD APPLIES FOR CALCELLATION OF ADMISSION, REFUND OF FEES WILL BE AS PER THE RULES OF REFUND NOTIFIED IN THE ADMISSION BROCHURE OF THE INSTITUTE / STATE CET CELL / D.T.E. WHICH I HAVE CAREFULLY READ AND UNDERSTOOD. FURTHER, I FULLY UNDERSTAND THAT IF MY WARD'S ATTENDANCE IS LESS THAT 75%, THE DIRECTOR OF THE INSTITUTE MAY TAKE NECESSARY ACTION AGAINST HIM/HER.**

I assure you that my ward will positively obey all the rules and regulations of the Institute.

Place : _____

Date : _____

(Signature of the Parent / Guardian)

Name of the Parent / Guardian _____

For office use only

ORIGINAL DOCUMENTS SUBMITTED IN THE OFFICE FOR THE BATCH (2023-2025)

COURSE : M.M.S

(Put () marks in appropriate boxes, Whichever Applicable)

1.F C Acknowledgement & Seat Acceptance Letter		13. Migration Certificate for Other Universities students	
2. Allotment Letter (Admitted at SIMSREE)		14. GAP Certificate	
3. Score Card through which you are admitted at SIMSREE MHCET / CMAT / CAT / MAT / ATMA ? _____		15. Anti Ragging Affidavit from Student & Parent	
4.SSC Marksheet		16. Caste Certificate	
5. HSC Marksheet / All Diploma Marksheet OR Diploma Certificate (as applicable)		17. Caste Validity Certificate	
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8. Post Graduate (PG) Marksheet (if any)		20. PH Certificate specify _____	
9. PG Provisional Passing Certificate OR Degree Certificate(if any)		21. EWS / TFWS Certificate	
10. Domicile Cert./ Birth Cert./ School Leaving Cert. (as per FC Confirmation Document List)		22. Income Certificate for EWS / TFWS (as per FC confirmation document List)	
11. Nationality Certificate (Birth Cert./School Leaving Cert./ Nationality Cert./Domicile Cert. (as per FC confirmation document List)		23. Photograph (4)	
12. Leaving Certificate / Transference Certificate of Last Qualifying Exam		24 Miscellaneous (if any) / Proforma / Cert. Specify _____	

Date :- _____

Place :- Mumbai - 400020

Name & Signature of the Officer@