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APPLICATION FORM

Name of the Programme														
PLEASE RETURN THIS F	ORM DULY FILLED	, AND I	ENCI	LOSI	E THE	FO	LLO	WING	G:					
▶ Photocopies of Mark sheets and Certificates of class 10 and class 10+2.														
► Affix a photo in the space indicated.														
► Attested copy of caste certificate and validity certificate for reserved category														
PERSONAL INFORMATION														
Full Name Mr/Mrs/M	-													
Mother's Name	Surname	Sex M	1ale [F	emale	Name E		ate of	Birth	Father's Na				
Mailing Address										Day	Mont	n	Year	r
Pin Code with STD code														
Permanent Address							with 312	code						
Postal	Code						one							
Place of Birth							Widi 31D	code						
NL	Place				State						Coun	try		
Nationality	nality Blood Group													
Email Address								Mobi	le No.					
Religion Caste														
Category General Reserved Category														
		SC	N.T(A)	N.T(B)	N. (C)	O.B.C.	S.	S.B.C. P.H.C.	Others specify					
	Please tick appropriate column	01 01						07 12	O 15					
	ED	JCAT	101	V D	ETA	IL:	S							

PLEASE PROVIDE ALL CERTIFICATES SUPPORTING THE INFORMATION GIVEN BELOW.

Name of the Examination	Name of the Board/University	Name of the School/College	Month/Year of Passing	Percentage of Marks
Class 10				
Class 10+2				
Name of Degree/Diploma				

LANGUAGES Mother Tongue Languages Known PARENT OR LEGAL GUARDIAN Full Name Father's Name Relation with Candidate **Profession** Contact Phone No. with STD code Mobile No. Mailing Address Phone No. Postal Code with STD code OTHER DETAILS Extra Curricular Activities **Hobbies** Any Physical Disability Yes No If yes, please specify Disability General Health: Any critical health issue the institute should know of to provide timely aid. How were you Informed about us? Newspaper Advertisement Exhibition Magazine Seminar Website Mailer Other Please Specify **DECLARATION** We hereby declare that the information given in this application is exact and complete. We acknowledge having read and understood this document, the current academic catalogue, as well as the payment Terms and Conditions. If at any stage it is found that We do not satisfy the admission criteria or the information furnished by us in this application is incorrect, our application for admission to the course will stand cancelled. In the event of securing admission for our ward, We agree to abide by all relevant Rules and Regulations of the Institute. In case of any dispute or differences of the opinion or interpretation arising out of the said programme, the dispute shall be referred for the Arbitration as per the Provisions of "The Arbitrationb & Conciliation Act 1996". It is further agreed that the Sole Arbitrator shall be the legal advisor of the Institute. Applicant's Signature Parent's/Guardian's Signature Place Place Date Date

Day

Month

Month