

UDAYBHANSINHJI





(An Institution of National Council for Cooperative Training, New Delhi, An autonomous body promoted by Ministry of Cooperation, Govt. of India, New Delhi)

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Website: www.urimanage.org.in

Application for Two Year's Full Time Residential Post Graduate Diploma in Management (Agribusiness Management) 2025 – 2027

| (| | ribusiness Man All India Counci | | | | Delhi) | | |
|----------------|---------------------|------------------------------------|--------------|----------------|-----------|-----------------------------|--|--|
| Mention the To | est Scores (valid f | or Admission in 2 | :025-27:- | | | | | |
| CAT | CMAT | MAT | ATMA | Differe CET | ent State | Passport Size Photos | | |
| 1.Name in Fu | II (as written in F | in Capital Lette | Certificate) | | | | | |
| Firs | st Name | Midd | Middle Name | | | Last Name | | |
| | | | | | | | | |
| | Email ID | | V | | | per | | |
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| | rdian's Details: | | | | | | | |
| Firs | t Name | Middle Name | | | Last Name | | | |
| | | | | | | | | |
| Parent's | Occupation | Mol | bile No. | | _ | ial Income of her/Mother | | |
| | | | | | | | | |
| Se | If Employed | Sovt. Employee | e , | Agric ılt | urist | Others | | |

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| First Name | Mid | dle Name | Las | Last Name | | | |
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| | | | | | | | |
| Mobile Number | | | | | | | |
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| | A | ddress | | | | | |
| Address for correspondence:- | | | | | | | |
| | | City:- | | | | | |
| | | | | | | | |
| State:- | | Country:- | | | | | |
| Pin code:- | Mobile No: | - | | | | | |
| | | | | | | | |
| Permanent Address:- | | | | | | | |
| | | City:- | | | | | |
| | | | | | | | |
| State:- | | Country:- | | | | | |
| | | | | | | | |
| Pin code: | Alternate I | Mobile No: | | | | | |
| Email Id Of Parent/Guardian's:- | | | | | | | |
| Date Of Birth | | | | | | | |
| Date Of Birth:- | / MM / | YYYY | | | | | |
| Gender (Please Tick):- Male:- | | Female:- | Other: | - 🗆 | | | |
| | | | | | | | |
| 5.Indicate the category to which you belong to(Please tick and attach photo copy of certificate) | | | | | | | |
| Gen SC ST | ОВС | Physically | EWS | Others | | | |
| (noncr | eamy) | challenged | | | | | |
| | | | Ш | | | | |

B) EDUCATIONAL QUALIFICATIONS (Give details from 10th standard onwards)

| Level of | Name of the | Board/ | Year of | Max. | Obtained | % of | Class/ |
|-------------|-------------------------|------------|---------|-------|----------|-------|--------|
| Examination | Examination | University | Passing | Marks | Marks | Marks | Grade |
| 10th | | | | | | | |
| Standard | | | | | | | |
| 10 + 2 | | | | | | | |
| Graduation | | | | | | | |
| 1 | and complete of college | | | | | | |

| Specify Name and complete | | · · | • | | |
|-----------------------------|--------------|-------------------------|--------|----|--|
| Address of college | | | | | |
|) Any Qualification | | | | | |
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| | | | | | |
|) WORK EXPERIENCE | | | | | |
| Organization | Designation | Scale / Salary Drawn | Period | | |
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|) Co-curricular Activities: | | | | | |
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| | _ | | | | |
| Sports & level at which p | participated | | | | |
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| Yes | | - | No | |
|--|---------------------------------------|--------------------|--------------------------|-------------|
| | | | | |
| I) Application Fee Details: - (| Fees of Rs. 500 |)/- non-refundal | ble for processing of a | npplication |
| UTR No. (In case of On-line payment | Bank Detail s | , non rotunua. | Date | |
| | | | | |
| OTHER RELEVANT INFORM | IATION | | | |
| | DECL | ARATION | | |
| declare that the information g have read the prospectus and hereby submit to the disciplin nd abide by the rules laid dow | agree to abide l nary jurisdiction | by the rules and r | egulations of the Instit | ute. |
| Place : Date : Signature of the Applicant | | | | |

Note:

- **1.** This application form is to be filled and a passport size photograph is to be pasted in the defined bracket.
- **2.** The filled application is to be scanned and first send by email -director@urimanage.org.in.
- **3.** All the relevant self-certified certificates along with the hardcopy of the filed in application form are to be send by post also. (Certificates required Marks sheet of X, XII, all semesters from 1st to 7th graduation Management Entrance Score Card and caste certificate- if applicable). (Sports, cocurricular and experience certificate if claimed)
- **4.** The hard copy of the filled in application be submitted along details of payment of Rs. 500/- as processing fees in the name of, "The Director", URICM, Gandhinagar at the address as

Udaybhansihji Regional Institute of Cooperative Management, Sector – 30, Gandhinagar – 382030, Gujarat. or on line payment in the accounts details given here.

Name Of Account Holder:-

Indian bank A/C No.: 50076771814,

Branch Gandhinagar, Gujarat

IFSC code IDIB000G522 MICR code 380019037

- **5.** Download android mobile app "PGDM ABM" from google play for more details about admission in PGDM (ABM) and Institute
- **6.** The last date for accepting filled in application form is 31st May, 2025