# UDAYBHANSINHJI
## REGIONALINSTITUTEOF COOPERATIVE MANAGEMENT(URICM) –Gandhinagar

(An InstitutionofNational Council for Cooperative Training, New Delhi,
An autonomous bodypromoted by Ministry of Cooperation, Govt. of India, New Delhi)
Sector-30, Gandhinagar-382030, Gujarat.
Mobile :+919998926650, +919586477450
E-Mail: director@urimanage.org.in, pgdmadmin@urimanage.org.in

Website:
www.urimanage.org.in

**Application for Two Year's Full Time Residential Post Graduate Diploma in Management (Agribusiness Management) 2026 – 2028**
**(Approved by the All India Council for Technical Education, New Delhi)**

**Mention the Test Scores (valid for Admission in 2026- 28 : -**

| CAT | CMAT | MAT | ATMA | Different State CET |
|---|---|---|---|---|
| | | | | |

Passport Size Photos

**A.PERSONAL DETAILS (All in Capital Letters)**

**1.Name in Full (as written in High School/SSC Certificate)**

| First Name | Middle Name | Last Name |
|---|---|---|
| | | |

| Email ID | Mobile Number |
|---|---|
| | |

**2.Parent/Guardian's Details:-**

| First Name | Middle Name | Last Name |
|---|---|---|
| | | |
| **Parent's Occupation** | **Mobile No.** | **Annual Income of Father/Mother** |
| | | |

| Self Employed | Govt. Employee | Agriculturist | Other |
|---|---|---|---|
| ☐ | ☐ | ☐ | ☐ |

**3.Mother's name: -**

| First Name | Middle Name | Last Name |
|---|---|---|
| | | |
| **Mobile Number** | | |

| Address | |
|---|---|
| **Address for correspondence:-** | |
| | **City:-** |
| **State:-** | **Country:-** |
| **Pin code:-** | **Mobile No:-** |
| | |
| **Permanent Address:-** | |
| | **City:-** |
| **State:-** | **Country:-** |
| **Pin code:** | **Alternate MobileNo :** |
| **Email Id Of Parent/Guardian's:-** | |

**Date Of Birth:-** DD / MM / YYYY

**Gender (Please Tick):- Male:-** ☐ **Female:-** ☐ **Other:-** ☐

**4.Indicatethecategorytowhichyoubelongto(Pleasetick and attachphoto copy ofcertificate)**

| Gen | SC | ST | OBC (noncreamy) | EWS | Other |
|---|---|---|---|---|---|
| ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |

**5.Are you physically challenged?**

**Yes:-** ☐ **No:-** ☐

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

| Level of Examination | Name of the Examination | Board/ University | Year of Passing | Max. Marks | Obtained Marks | % of Marks | Class/ Grade |
|---|---|---|---|---|---|---|---|
| 10th Standard | | | | | | | |
| 10 + 2 | | | | | | | |
| Graduation | | | | | | | |
| Specify Nameand Full Address ofcollege | | | | | | | |

**C)Any Other Qualification**

| |
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**D) WORK EXPERIENCE**

| Organization | Designation | Scale / Salary Drawn | Period | |
|---|---|---|---|---|
| | | | From | To |
| | | | | |
| | | | | |
| | | | | |

**E) Co-curricular Activities:**

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**F) Sports & level at which participated**

| |
|---|
| |
| |
| |

**G) Have you applied for PGDM (ABM) 2026-28 course in VAMNICOM, Pune**
**(Please tick and attach photo copy of receipt)**

| Yes | No |
|---|---|
| | |

**H) Application Fee Details: - (Fees of Rs. 500/- non-refundable for processing of application)**

| UTRNo. (IncaseofOn-line payment | Bank Detail's | NameOfBank | Date | |
|---|---|---|---|---|
| | | | | |
| | | | | |

**I) OTHER RELEVANT INFORMATION**

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| |

# DECLARATION

- **Ideclare that the information given by me in the application is true to the best of my knowledge.**
- **Ihave read the prospectus and agree to abide by the rules and regulations of the Institute.**
- **Ihereby submit to the disciplinary jurisdiction of the authorities of the Institute and shall observe and abide bythe rules laid down by the Head of the Institute.**

**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 email it to -director@urimanage.org.in.**

   **All the relevant self-certified certificates, along with the hard copy of the filled application form are to be sent by post also. Required documents are marksheet of 10th , 12th , graduation (all), management entrance test score card, cast certificate (if applicable) and sports and experience certificates- if claimed.**
3. **The duly filled application form must be submitted in hard copy along with a processing fee of ₹500/- payable in favour of "The Director, URICM, Gandhinagar" at Udaybhansihji Regional Institute of Cooperative Management, Sector-30, Gandhinagar–382030, Gujarat, or through online payment as per the account details provided.**

**Name Of Account Holder:-**

| | |
|---|---|
| **Indian bank A/C No. :** | **50076771814,** |
| **Branch** | **Gandhinagar, Gujarat** |
| **IFSC code** | **IDIB000G522** |
| **MICR code** | **380019037** |

4. **Download android mobile app "PGDM ABM" from google play for more details about admission in PGDM**
5. **(ABM) and Institute**
   **The deadline for accepting completed application forms is June 30, 2026.**