



ANNAMACHARYA INSTITUTE OF TECHNOLOGY & SCIENCES (AUTONOMOUS)

NEW BOYANAPALLI, RAJAMPET-516126

MBA III Semester (R15)

(Read the instructions given below carefully before filling the application)

**MBA**

Application for (Regular / Supplementary) \_\_\_\_\_

Month & Year of Examination \_\_\_\_\_

**HALL TICKET NUMBER**

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Name of the Student (as per S. S. C.) \_\_\_\_\_

Father's Name (as per S. S. C.) \_\_\_\_\_

Mother's Name \_\_\_\_\_

Date of Birth (as per S. S. C.)

D	D	M	M	Y	Y	Y	Y		

Mobile Number

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E-Mail ID: \_\_\_\_\_

Details of subjects Registered: (Tick [✓] the appropriate box)

1	5P1A31	International Business
2	5P1A32	Entrepreneurship Development
3	5P1A33	Strategic Management
<b>Elective - I</b>		
4	5P1A34A	Human Resource Planning
5	5P1A34B	Banking and Financial Institutions
6	5P1A34C	Retail Marketing
7	5P1A34D	e-Business
<b>Elective - II</b>		
8	5P1A35A	Leadership
9	5P1A35B	Financial Markets and Services
10	5P1A35C	Services Marketing
11	5P1A35D	Enterprise Resource Planning

<b>Elective - III</b>		
12	5P1A36A	Wage and Compensation Management
13	5P1A36B	Security Analysis and Portfolio Management
14	5P1A36C	Consumer Behaviour
15	5P1A36D	Customer Relationship Management
<b>Elective - IV</b>		
16	5P1A37A	Employee Performance Management
17	5P1A37B	Insurance and Risk Management
18	5P1A37C	Sales and Distribution Management
19	5P1A37D	Data Warehousing and Mining
20	5P1A38	Seminar (Success Stories of Entrepreneurs)

In case of Supplementary  
Number of Subjects Registered

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Exam fee amount:

Marks Memo: 30.00

Fine Fee: \_\_\_\_\_

Total Amount: \_\_\_\_\_

Certified that the above information is CORRECT and Filled by me.

Submission Date:

Signature of the candidate

**Instructions:**

- Candidates are instructed to be very careful about the entries to be made in the application.
- All entries should be in candidate's own handwriting.
- Candidate will be held responsible for any incorrect entry that he/she makes.
- Any false or incorrect statement in the application will render the candidate liable to disciplinary action.
- **The filled in application should be submitted in the Examination Section.**

Office Use Only Fee Receipt Number:

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