

INDIAN INSTITUTE OF MANAGEMENT CALCUTTA



Application for Post Graduate Diploma in Management for Executives 2013-14

1. Personal Ir	nformation								
Name	Firs	st name	Middle	e name	Family name			f -attested	
					1 1		t colour ograph		
Gender	Male	Female	Date of bi	irth	dd/mm/yyy	/y	•	•	
Nationality			Place of b	nirth					
	_		1 Idoc of k)	City			ountry	
Passport nun					Date of expiry	1			
Place of issue						dd/m	nm/yyyy		
Other citizens					Country of curre	nt			
Country of pe	ermanent resid	dence			residence				
Mother tongu					1				
Other langua									
2. Contact Inf	formation								
		Company							
		No. and Str	eet						
Present business address									
		City			Postal code				
		State			Country				
		Phone			Fax				
		No. and Str	eet						
Permanent a	ddress	City			Postal code				
		State			Country				
		Phone			Fax				
Preferred cor	mmunication								
address	illiullication	Present business address No. and Street			Permanent ad	dress	Address given below		
		City			Postal code				
		State			Country				
		Phone			Fax				
Email addres	s				Alternate email a	address			
Preferred pho	one number				Alternate phone	number			
3. Preference	es								
Interview loca	ation	Bangalore	Mumbai	Kolkata	New Delhi			Telephonic	
		*Preference for telephonic interviews will be entertained only in exceptional cases							

Accommodation						commodation available on campus. Students		
(During the course)	Single	Family	provided with family accommodation will be required to pay an additional Rs. 48,000/- per annum					
4. Application-fees INR 2000/-(Non refundable from outside India. Banker's Cheque/Demand payable at Kolkata, India	•							
Pankaria Charus/DD Na				1 1				
Banker's Cheque/DD No.			Date		dd/mm/	′уууу		
Bank details								
5. Miscellaneous Information	on							
The course fee for the PGPEX pro An amount of Rs. 20000/- (Rupee *Education loans are available at o	s Twenty thouse	and) has to be paid	as refundabl	le caution de _l	posit at the time of registratio			
How you propose to pay fo	r this course	<u></u>						
How you propose to pay for	or tills course	Bank	Own fund	Other sour	rces(Please specify)			
How did you come to know	X							
Ave you are applicant?				Year of p	ear of previous application			
Are you a re-applicant?	No	Yes	Registra					
6. Test scores								
GMAT	*GMAT - Graduate Managen The GMAT programme code for F Pearson VUE within the application Registration number Test date Verbal score Quantitative score		PGPEX is 90	YY F	•	•		
	Overall score			Percentile				
	AWA score				Percentile			
		est of English as a Foreign Language re should be provided as a proof of proficiency in English only if medium of instruction during ot English						
TOFFI	Registration number							
TOEFL	Test date		l l dd/mm/yyyy					
	Overall sco	re						
			a proof of p	roficiency in	English only if medium of ins	struction during study		
TWE	Registration	n number						
	Test date		1 1					
	1 col uale		dd/mm/yyyy					

	Overall score						
		*IELTS - International English Language Testing System IELTS score should be provided as a proof of proficiency in English only if medium of instruction during study was not English					
IELTS	Registration number						
ILLIO	Took data	1 1					
	Test date	dd/mm/yyyy					
	Overall score						

7. Academic qualifications

Please attach attested/notarized copies of transcripts of all examinations passed. Use extra sheets if necessary

Institution name with full	Exam/	I	Dates attended		CGPA/	Division
address	Degree (Major)	From	То	Year of passing	Percenta ge	Division
		1 1	1 1			
		1 1	1 1			
		1 1	1 1			
		1 1	1 1			
		1 1	1 1			

8. Work experience	
Aggregate full time work-experience	

(In completed years and months as on 31st March 2013)	Years		Months			
Managerial work-experience						
(In completed years and months out of aggregate work-experience given above)	Years		Months			
	Name					
	Industry					
	Website					
	Total employees					
	Annual sales (USD)					
Your current employer						
	May we contact your current	Yes		No		
	employer?	If yes, please give	name, desig	gnation, postal-address, e-		
		mail and phone det	tails (includi	ng country and area code)		
	Job title					
Your current job	Area of expertise					
•	No. of reportees					
	Title					
Your direct supervisor	To whom does					
	he/she report					
Your job description						
	na natura of work, major rooms	annihiliting ata (If noo	oible draw	an arganization abort and		
Please give a description of your exact job, including give your job description. Use extra sheets if necessity is a second of the second of t	ng nature of work, major respt ssary)	irisibilities etc. (II pos	Sible, uraw	an organization chan and		

9. Career summary

Please provide chronological details of your work experience below. List your present position first. Kindly note that you will be required to submit a certificate of employment from your last employer in case you are granted admission. Use extra sheets if necessary

	Name of organization	
	Industry	
	Complete address including contact numbers	
	Website address	
1	Starting date	1 1
	Ending date	1 1
	Last designation	
	Functional area of work	
	Last drawn annual salary	
	International experience in months (if any)	
	Reason for leaving	
	Name of organization	
	Industry	
	Complete address including contact numbers	
	Website address	
2	Starting date	1 1
	Ending date	1 1
	Last designation	
	Functional area of work	
	Last drawn annual salary	
	International experience in months (if any)	
	Reason for leaving	
	Name of organization	
	Industry	
3	Complete address including contact numbers	
	Website address	
	Starting date	1 1
	Ending date	1 1
	Last designation	

	Functional area of work	
	Last drawn annual salary	
	International experience in months (if any)	
	Reason for leaving	
	Name of organization	
	Industry	
	Complete address including contact numbers	
	Website address	
4	Starting date	1 1
	Ending date	1 1
	Last designation	
	Functional area of work	
	Last drawn annual salary	
	International experience in months (if any)	
	Reason for leaving	
	Name of organization	
	Industry	
	Complete address including contact numbers	
	Website address	
5	Starting date	1 1
	Ending date	1 1
	Last designation	
	Functional area of work	
	Last drawn annual salary	
	International experience in months (if any)	
	Reason for leaving	

10. Activities and interests

Please list, in order of importance to you, any extra-curricular activities in which you are/have been involved (i.e., sports, politics, community activities, hobbies etc.) Use extra sheets if necessary At Least ONE activity must be listed

A skinikullada wa sk	Dura	ntion	Level of involvement/ achievements etc.		
Activity/Interest	From	То	Level of involvement/ achievements etc.		

11. Statement of Purpose	

12a. Essay 1	
Give detailed descriptions of three activities you performed in your workplace in the last five years which will help us assess your abilities and strengths. Use extra sheets if necessary	I

12b. Essay 2	incident of	vour life who	n vou bod	to food a va	n, domonding/s	hallanging	oituation
Narrate an important/unusual How did you overcome the necessary	situation?	What lessons	n you nad s did you	learn from	this incident?	Use extra	sheets if

12c. Essay 3 (Only for re-applicants)						
What are the changes in your profile vis-à-vis previous year's?						

12d. Essay 4 (Optional)						
Anything else you would like to highlight in support of your application						

13. References

Two letters of recommendation in the format given must be sent to the Institute within the application deadline date. The recommenders should separately seal the envelopes and sign on the flap.

Please list below the name and complete address of each person to whom you have given a recommendation form. Each should be well acquainted with your intellectual abilities, academic performance, and personal character. At least one of these two letters should be by someone from industry who is familiar with your professional achievements

	Recommender 1
Name	
Complete address	
Organization	
Relationship with applicant	
Email	
Mobile	
Phone	
Fax	
	Recommender 2
Name	
Complete address	
Organization	
Relationship with applicant	
Email	
Mobile	
Phone	
Fax	

Letter of recommendation by the recommender in the prescribed format may either be sent to the following address by 31st August 2012

PGPEX Office Indian Institute of Management Calcutta Diamond Harbour Road, Joka Kolkata 700 104 India

Tel:+91-33-2467-8300-06, Fax:+91-33-2467-6629

OR

The recommender may send the scanned copy of the recommendation letter duly signed by him/her via e- mail directly to pgpex@iimcal.ac.in

Please note that the institute will not be responsible if the recommendation letter is not received by us within the due date (either hard copy or e-mail). In absence of the receipt of the recommendation letter within due date, the application is liable to be rejected.

14a. Letter of recommendation							
This form should be returned by	This form should be returned by the applicant with all other application material						
	This section	n is to be comp	oleted by the a	pplicant			
Name							
Signature							
	This section is	s to be comple	ted by the rec	ommender			
How long have you known the applicant?							
In what capacity have you known the applicant?							
Based on your experience, rate and professional standing	e the applicant	t in the followi	ng areas vis-à	-vis persons of	similar academic	;	
	Truly exceptional (Top 2%)	Exceptional (Top 10%)	Very good (Top 25%)	Good (Middle 50%)	Below average (Lower 25%)	Can't say	
Initiative							
Flexibility							
Maturity compared to peers							
Oral communication skills							
Written communication skills							
Ability to work with others							
Ability to accept constructive feedback and learn from the same							
Ability to understand others' viewpoints							
Ability to finish work in time							
Self confidence							
Leadership							

Г						
Please fill out the following information and/or write a letter of recommendation						
on any type of sp unfavorable indica	pecial project, please tions of the applicant's	give an evaluation give an evaluation give an evaluation given the sign of the	knesses of the applican on of his/her performa tial and his/her ability to extra sheets if necessa	ince. Please in o do work indep	dicate any favorab	le or
Nome		Simmatur-		Data		
Name		Signature		Date	İ	

14b. Letter of recommendation						
This form should be returned by	This form should be returned by the applicant with all other application material					
	This section	is to be comp	leted by the a	pplicant		
Name						
Signature						
	This section is	to be comple	ted by the rec	ommender		
How long have you known the applicant?						
In what capacity have you known the applicant?						
Based on your experience, rate and professional standing	e the applicant	t in the followi	ng areas vis-à	-vis persons of s	similar academic	;
	Truly exceptional (Top 2%)	Exceptional (Top 10%)	Very good (Top 25%)	Good (Middle 50%)	Below average (Lower 25%)	Can't say
Initiative						
Flexibility						
Maturity compared to peers						
Oral communication skills						
Written communication skills						
Ability to work with others						
Ability to accept constructive feedback and learn from the same						
Ability to understand others' viewpoints						
Ability to finish work in time						
Self confidence						
Leadership						

Г						
Please fill out the following information and/or write a letter of recommendation						
on any type of sp unfavorable indicat	pecial project, please tions of the applicant's	give an evaluation grant et al. e give an evaluation et al. e e e e e e e e e e e e e e e e e e e	knesses of the applican on of his/her performa tial and his/her ability to extra sheets if necessa	ince. Please in o do work indep	dicate any favorab	ole or
Nome		Cimpature		Data		
Name		Signature		Date		

15. Application submission

Please send the completely filled in application form along with GMAT score, two recommendation letters, required documents if any, and application fee, in the form of Banker's Cheque/Demand Draft drawn in favor of "Indian Institute of Management Calcutta" payable at Kolkata, India, to the following address:

PGPEX Office Indian Institute of Management Calcutta Diamond Harbor Road, Joka Kolkata 700 104 India

E-Mail: pgpex@iimcal.ac.in Tel : +91-33-2467-8300-06 Fax : +91-33-2467-6629

The completed application form should reach Indian Institute of Management Calcutta by 31st August, 2012

16. Disclaimer and Signature

I certify that the information provided here is true and complete to the best of my knowledge. If this application leads to an offer of admission, I understand that false or misleading information may result in the cancellation of my candidature

·							
Signature		Date					