

| 1. | Full Name : | | | | | | | | |
|-----|------------------------------------------------------|------------------|--|--------|-------------------|-----|--------|------------------------|--|
| 2. | Date Of Birth: (DD/MM/YYYY) | | | | | | S | sport ize ograph | |
| 3. | Age as on 01-07-2024 | | | | | | rnou | ograpn | |
| 4. | Gender:- (Male/Female) | | | | | | | | |
| 5. | Domicile: | | | | | | | | |
| 6. | Students contact no | | | | | | | | |
| 7. | E-mail | ID: | | | | | _ | | |
| 8. | Category (Gen./SC/ST/OBC):- Nationality: | | | | | | | | |
| 9. | Father's Name: Mobile No. : | | | | | | | | |
| 10. | Mother's Name: Mobile No. : | | | | | | | | |
| 11. | . Permanent Address (for mailing of certificates):- | | | | | | | | |
| | | DistrictStatePin | | | | | | | |
| 12 | . Correspondence Address: | | | | | | | | |
| 12. | DistrictState | | | | | | | | |
| 13. | 3. Blood Group: | | | | | | | | |
| 14. | 14. Educational Qualification: (X & XII) | | | | | | | | |
| | Sl. No. | Board/University | | Stream | Marks Obtained | Div | vision | Percentage | |
| | 1 | | | | | | | | |
| | 2 | | | | | | | | |
| 15. | . Name of Guardian | | | | | | | | |

NB: - Documents to be enclosed along with this application form.

- 1. Birth Certificate
- 2. Gen./OBC/SC/ST Certificate
- 3. Domicile Proof
- 4. Marks sheets for Class X,XII
- 5. Provisional Certificate for XII
- 6. Transfer Certificate
- 7. Medical Report
- 8. 10 Passport photographs with formal dress

IHM CONTACT NOS. 6033096587/9366284029.