

## **GUIDELINES TO FILLUP THE APPLICATION**

This application is for admission to M.B.A Programme (Regular & Part Time – Self Supporting) offered in the University Department, College of Engineering, Anna University, Chennai Guindy Campus only.

Separate application has to be filled for 1) M.B.A. 2) M.B.A. (Hospitality Management – Self Supporting) and 3) M.B.A. (Part Time – Self Supporting) Programme.

1. Download the application form M.B.A Degree Programme
  - a. Fill up the details in the application form
  - b. Affix a recently taken photograph (duly attested) in the space provided
  - c. Enclose attested copies of the following:
    - i) TANCET – 2012 Hall Ticket
    - ii) X Std. Mark Sheet
    - iii) XII / HSC Std. mark sheet.
    - iv) All the mark sheets of the qualifying examination.
    - v) Degree Certificate or Provisional Degree Certificate (Candidates appearing for final semester/year exam. of the Qualifying Degree in April / May 2012 have to enclose a bonafide certificate from the Head of the Institution where the candidate is studying) or attested photocopy of the University Examination April/May 2012 Hall Ticket.
    - vi) Permanent Community Certificate issued by the competent authority in Card format (for BC / BCM / MBC / SC / SCA / ST candidates).
    - vii) Nativity certificate (if applicable).
    - viii) Medical Certificate issued by the District Medical Board for Difference Abled Person (if applicable).

### **Enclosures:**

- a. Self-addressed stamped post card of ` 6/- for acknowledgement
  - b. Self-addressed stamped envelope of ` 8/- for Counselling Call Letter
2. Download the Application cover page (A4 size) and paste it on A4 size cover for sending the application.
3. D.D. for ` 300/- General category ( ` 150/- for SC/SCA/ST candidates belonging to Tamil Nadu). D.D. should be drawn in favour of **“The Director, Admissions, Anna University”, payable at Chennai.**

All the above documents should be kept inside an A4 size cover and send it to the **“The Director (Admissions), Centre for Admissions, Anna University, Chennai -600 025”.**



# ANNA UNIVERSITY, CHENNAI - 600 025

## APPLICATION FOR ADMISSION TO M.B.A DEGREE PROGRAMME (2012 - 2013)

### NOTE:

1. Read the "Information & Instructions to the Candidates" carefully before filling the application form
2. Fill up the application legibly in block letters and encircle the code number applicable to you.
3. Last date for receipt of completed application is 15.06.2012
4. Separate application has to be filed for 1) M.B.A. 2) M.B.A. (Hospitality Management–Self-Supporting) 3) M.B.A. (Part-time – Self-Supporting)

1) TANCET 2012 Reg. No.:

(copy of the Hall-Ticket to be enclosed )

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1a) Programme applied for

M.B.A.	M.B.A. (Hospitality Management) (Self - Supporting)	M.B.A. (Part Time) (Self - Supporting)
1	2	3

2) Name (in Block letters with initials at the end)

\_\_\_\_\_  
Address of the candidate for communication  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Affix a recently taken  
photograph. (5 cm x 4 cm)

Photograph should be  
attested by an officer of  
Grade A/B or by the Head  
of the Institution last  
attended.

PIN: \_\_\_\_\_

Phone No with STD code \_\_\_\_\_ Mobile No. \_\_\_\_\_

3) Date of Birth (as entered in SSLC or its equivalent)

Date	Month	Year

4) Gender

Male	Female
1	2

5) Community

(Copy of permanent community certificate card  
must be enclosed except for 'OTHERS' category)

ST	SC	SC (Arunthathiyars)	MBC/DNC	BC	BC (BC Muslim)	OTHERS
1	2	3	4	5	6	7

5a) Name of the Community : .....

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5b) Code No. of community (as given in the Annexure of Information & Instruction to candidates)

**Note: Other state candidates will be classified under 'OTHERS' category only**

Tamil Nadu	Other State
1	2

6) Nativity

Indian	Foreigner
1	2

7) Nationality

Yes	No
1	2

8) Are you a Differently Abled candidate  
(If yes enclose a certificate from the District Medical Board)

B.Tech. B.E./	B.A./B.Sc B.Com	M.A./ M.Sc M.Com	Others
1	2	3	4

9a) Qualifying Degree

Branch / Major Subject : \_\_\_\_\_

Yes	No
1	2

9b) Have you studied under 10+2+3 or 4 years degree (or)  
10+3 years diploma+3 years degree pattern of education

Yes	No
1	2

9c) Duration (in Months) of study of the qualifying degree

10) Details of School / College studying / studied

Sl. No.	Class	Year of passing	Name of School / College / University	Name of State
1	X Std.			
2	XI Std.			
3	XII Std. or 3 year Diploma			
4	Degree _____			

10a) Appearance in the Qualifying Examination

Passed	Appeared for final exam in April / May 2012
1	2

Year of passing / Appeared for Final Exam.in..... (Month)..... (Year)

10b) Have you passed all the subjects up to prefinal / semester / year of the Qualifying Examination

Yes	No
1	2

11) Average Percentage of marks secured upto Pre-final semester/year in the Qualifying Examination (copies of Marks sheets should be enclosed) (where Grades / Grade points are awarded, produce equivalent marks)

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12) Name of Father / Guardian :

13) Details of Registration fee:

Name of the Bank	DD. No.	Date	Amount ( )

**Note:** Demand Draft ` 300/- General category ( ` 150/- for SC/SCA/ST candidates belonging to Tamil Nadu)  
The Demand Draft should be drawn in favour of "The Director, Admissions, Anna University, payable at Chennai."  
**Application without Registration fee will be rejected.**

### DECLARATION

All the information furnished above is true to the best of my knowledge. I am aware that any wrong information or suppression of information may result in punitive action in addition to the summary cancellation of my candidature for the Admission.

Date:

Place:

Signature

## CERTIFICATE No. I

Name: ..... Application No.

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### Medical Certificate for Orthopaedically Physically Challenged (TO BE ISSUED BY DISTRICT MEDICAL BOARD)

Certified, that the District Medical Board of ..... (City) have this ..... day of ..... 2012 examined the Candidate whose particulars are given below.

- |  |   |  |
|--|---|--|
| 1. Name of the Candidate   | : |  |
| 2. Father's Name   | : |  |
| 3. Sex   | : |  |
| 4. Approximate Age   | : |  |
| 5. Identification Marks  | : | 1.   |
|  |   | 2.   |
| 6. Whether audilogically / visually handicapped<br>(if yes for either one or both medical certificate / s for<br>fitness from the respective specialist /s to be produced) | : |  |
| 7. Nature of Orthopaedic Handicap  | : |  |
| 8. Extent of permanent disability in percentage  | : |  |
| 9. Whether the Candidate fulfils the following Standards<br>and may be considered for admission to undergo studies<br>in Engineering College / Technical Institution       | : |  |
| (a) Normal Blood Pressure  | : | Yes / No                                   |
| (b) Mentally Normal  | : | Yes / No                                   |
| (c) Independent in ambulation with or without<br>calipers but without any support  | : | Yes / No                                   |
| (d) Good standing balance with or without calipers<br>but Without any support  | : | Yes / No                                   |
| (e) Hand function within normal limits without any aid   | : | Yes / No                                   |
| (f) Good control over bowel and bladder  | : | Good / Not good                            |
| (g) Is the disability non-progressive  | : | Yes / No                                   |
| 10. Whether eligible for consideration under Physically Challenged Quota   | : | Yes / No                                   |
| 11. Whether the candidate is physically and mentally<br>fit to be considered for admission in Engineering<br>College / Technical Institution                               | : | Yes / No (If no please<br>specify reasons) |

Space for affixing recent  
Passport size photograph  
of the candidates duly  
attested by chairman  
District Medical Board

**Signature of the Applicant**

**Chairman, District Medical Board**

	<b>Members</b>	
<b>Date with seal of</b>	1.	
<b>Medical Board</b>	2.	

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**Note: Candidates with permanent Physical Impairment 40 and above are eligible for consideration under reserved quota.**

## CERTIFICATE No. II

Name: .....

Application No.

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### Medical Certificate for Hearing Impaired (To be issued by the District Medical Board)

Certified, that the District Medical Board of ..... (City) have this ..... day of ..... 2012 examined the Candidate whose particulars are given below.

1. Name of the Candidate :

2. Father's Name :

3. Sex :

4. Age :

5. Identification Marks 1)

2)

6. Whether Orthopaedically / Visually handicapped : Yes / No  
(If yes for either one or both medical certificate /s  
for fitness from the respective specialist /s to be produced)

7. Nature of hearing loss and

Extent of disability	:	RE.	LE.	
a) Pure tone average db	:	.....	.....	
b) Speech discrimination score	:	.....	.....	

8. a) Whether a suitable hearing aid to be used : Yes / No

b) Is the impairment non-progressive : Yes / No

9. Whether eligible for consideration under physically  
Handicapped quota : Yes / No

10. Whether the candidate is physically and mentally  
fit to be considered for admission in engineering  
College / Technical institution : Yes / No (if no please specify  
reasons)

Signature of the Applicant

Chairman, District Medical Board

Date with seal of

Medical Board

Member

1.

2.

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**Note: Candidates with hearing ability 40 db and above only in the better ear with speech discrimination score of 50% and above is eligible for consideration under reserved quota.**

**CERTIFICATE No. III**

Name: .....

Application No.

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**Medical Certificate for Visually Impaired (To be issued by the District Medical Board)**

Certified, that the District Medical Board of ..... (City) have this ..... day of ..... 2012 examined the Candidate whose particulars are given below:

1. Name of the Candidate :
2. Father's Name :
3. Sex :
4. Age :
5. Identification Marks 1) ..... 2) .....
6. Whether Orthopaedically / audilogically handicapped : Yes / No  
(If yes for either one or both medical certificate /s for fitness from the respective Board has to be produced)
7. Low vision: (Person with low vision means a person with impairment of vision of less than 6/18 to 6/60 with best correction in the better eye or impairment of field in any one of the following categories)
  - a) Reduction of fields less than 50 degree :
  - b) Heminaopia with macular involvement :
  - c) Attitudinal defect involvement lower fields :
8. Categories of Visual Disability  
(Please choose the appropriate box)

Space for affixing recent  
Passport size photograph  
of the candidates duly  
attested by District  
Medical Board

Category	Better eye	Worse eye	% age impairment	Tick (as Applicable)
Category O	6/9 – 6/18	6/24 to 6/36	20%	
Category I	6/16 – 6/36	6/20 to Nil	40%	
Category II	6/40 – 4/60 or field of vision 10° - 20°	3/60 to Nil	75%	
Category III	3/60 to 1/60 or field of vision 10°	F.C at 1 ft. to Nil	100%	
Category IV	F.C at 1 ft. to Nil or field of vision 10°	F.C at 1 ft. to Nil	100%	
One eyed persons	6/6	F.C at 1 ft. to Nil or field of vision 10°	30%	

(ONE EYED) with normal vision are not considered as Note: F.C. means Finger Count

9. Whether eligible for consideration under Physically Handicapped quota : Yes / No
10. Whether the candidate is physically and mentally fit to be considered for admission in engineering College / Technical institution : Yes / No (if no please specify reasons)

Signature of the Applicant

Chairman, District Medical Board

Date with seal of

Medical Board

Member

1.

2.

**Note: Candidates with low vision of 40% Impairment and above are considered as disabled and are eligible for consideration under reserved quota.**

## CERTIFICATE No. IV

Name: ..... Application No.

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### Certificate of permanent residence for Other State Candidates

Certified that Thiru / Thirumathi .....Parent / Guardian \*/  
Husband of Thiru / Selvi / Thirumathi \*\* .....a  
candidate for admission to .....Degree Programme in Anna  
University, Tamil Nadu has / had permanent residence at .....in  
the State of .....

Station :

Signature :

Date :

Name and Designation of the  
Certificate issuing Authority:

Seal :

If the above is only a true copy , obtain the attestation below :

**/True Copy/  
Attested**

Station:

Signature:

Date:

Name and Designation of the  
Certificate issuing Authority:

Seal:

- 
- \*       Applicable only when both parents are deceased  
\* \*     In this case the permanent residence of husband (not of parent or Guardian) should be  
          furnished

1. The Original Certificate should have been signed by the Officer of the Revenue Department not below the rank of a Deputy Tahsildar in the District concerned whether in independent charge or on other duty in the same scale of pay or by the Block Development Officer – Cum – Panchayat Union Commissioner in the Block concerned.
2. I.A.S. and other Officers of the Secretariat not lower in status than a Deputy Secretary to Government are competent to issue this certificate in respect of candidates belonging to the State provided they have personal knowledge of the facts stated in the certificate and make themselves fully responsible for the facts stated.
3. The certificates should bear the stamp of the office of the Officer signing the certificate. The certifying officer should insist upon clear proof of the permanent residence of the parent or guardian of the candidate and satisfy himself of the genuineness of the residential qualification.
4. If any one of the parents of a candidate is alive the state of permanent residence of the surviving parent can alone be taken into account. The candidate may choose the state of permanent residence of a candidate's guardian need be given (and will be taken into account) only if both the parent of the candidate are dead. The relationship of the guardian to the candidate should also be mentioned.
5. If both parents are alive the State of the permanent residence of father of the candidate only should be taken into account.

**DO NOT FOLD**



**ANNA UNIVERSITY, CHENNAI - 600 025**  
**M.B.A. DEGREE PROGRAMME (2012 - 2013)**

Affix  
stamp if  
sending  
by post

**TANCET 2012**

**Reg.No:**

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**COURSE APPLIED FOR**

**Tick**

1) MBA (Regular)	
2) MBA (Hospitality Management - SS)	
3) MBA (Part Time - SS)	

**From :**

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**To**  
**The Director**  
**Centre for Admissions**  
**Anna University**  
**Chennai – 600 025.**



# ANNA UNIVERSITY, CHENNAI - 600 025

**M.B.A. Degree Programme 2012 - 2013**

Affix  
Rs.6/-  
Stamp

(Envelope for Counselling Call Letter)

TANCET 2012 (M.B.A) Reg. No:

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To

Thiru/Tmt .....

.....

.....

.....

From

Director (Admissions)  
Centre for Admissions  
Anna University  
Chennai - 600 025.

PIN:

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**ANNA UNIVERSITY, CHENNAI - 600 025**  
**M.B.A. DEGREE PROGRAMME (2012 - 2013)**

**\*ACKNOWLEDGEMENT**

TANCET 2012 (M.B.A.) Reg. No:

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Ref : Your application to M.B.A. Degree Programme 2012 - 2013.

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The receipt of your Application to the M.B.A. Degree Programme 2012 - 2013 is acknowledged. Date, Time & Venue of Counselling will be intimated to you, if you are eligible.

Director (Admissions)

\* Write your mailing address and affix Rs. 6/- Stamp in the space provided on the reverse side. P.T.O

**Office Seal:**

From  
Director (Admissions)  
Centre for Admissions  
Anna University  
Chennai - 600 025.

Affix  
Rs.6/-  
Stamp

To

Thiru/Tmt .....

.....

.....

.....

PIN : .....