

**VIVEKANANDA INSTITUTE OF SOCIAL WORK AND SOCIAL SCIENCES
[VISWASS]**



For Office Use

Serial No: _____ Index No: _____ Session _____

Date of Admission _____

Recommendation of Principal Head Roll Number : _____

**VISWASS SCHOOL OF FINANCE
APPLICATION FORM FOR ADMISSION TO
MASTER OF FINANCE AND CONTROL
(M F C)**

(To be filled by applicant by own handwriting)

<p>1. Title/Name</p> <p>Surname/ Family name <input style="width: 100%;" type="text"/></p> <p>First name <input style="width: 100%;" type="text"/></p> <p>Middle name <input style="width: 100%;" type="text"/></p>	<p>A recent passport size photograph of the candidate should be pasted here</p>								
<p>2. Fathers / Guardian name, occupation and relationship</p> <p>Name-----</p> <p>Occupation-----</p> <p>Relationship-----</p>	<p>5. Date of Birth (In figures)</p> <table border="1" style="width: 100%; height: 20px;"><tr><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td></tr></table> <p>(In words) _____</p>								
<p>3. Permanent address</p> <table border="1" style="width: 100%;"><tr><td style="height: 20px;"></td></tr><tr><td style="height: 20px;"></td></tr><tr><td style="height: 20px;"></td></tr><tr><td style="height: 20px;"></td></tr><tr><td style="height: 20px;"></td></tr></table> <p>Phone No: <input style="width: 80%;" type="text"/></p>						<p>6. Sex and Marital Status</p> <p>Male <input type="checkbox"/> Female <input type="checkbox"/></p> <p>Married <input type="checkbox"/> Unmarried <input type="checkbox"/></p>			
<p>4. Mailing address</p> <table border="1" style="width: 100%;"><tr><td style="height: 20px;"></td></tr><tr><td style="height: 20px;"></td></tr><tr><td style="height: 20px;"></td></tr><tr><td style="height: 20px;"></td></tr></table> <p>Phone No: <input style="width: 80%;" type="text"/></p>					<p>7. Mother tongue <input style="width: 100%;" type="text"/></p> <p>8. Nationality <input style="width: 100%;" type="text"/></p> <p>9. Whether belongs to SC <input type="checkbox"/> ST <input type="checkbox"/></p> <p>10. Whether physically handicapped if yes, attach attested copy of certificate from the competent authority.</p>				
	<p>11. Further details (Overseas Applicants)</p> <p>Country of Birth-----</p> <p>Area of permanent residence-----</p> <p>Date of last entry into India-----</p>								

12. Education and Academic Records - HSC and above

SL. No.	Exam. Passed	Name of Board/ University	Year/ Month of Passing	Subjects Taken	Total Marks	Marks Secured	% of Marks

13. Any prizes in important games, sports, extra-curricular events? If so, enclose copies of certificate

14. How do you hope to be financed? (please tick appropriate) Self / Sponsored/ other source (please specify-----)

15. **Work Experience** (If applicable)

Name & Address of Organisation	Title & Description of post	Was this work supervised, (If so, by whom)?	Hours worked per week	Dates of Experience	
				From	To

16. Health Declaration

Applicants must declare any physical or mental health condition that might affect their ability to complete the course safely. This declaration will not bar you from studying, but we would need to ensure that appropriate support is available.

I do/do not (delete as appropriate) have a physical / mental health condition that might affect my ability to complete the course safely.

17. Disciplinary Matters and convictions

Answering any of these questions will not necessarily disqualify you from the course, but the implications will be discussed at the time of interview.

Are you currently undergoing or have you ever undergone disciplinary proceedings? **Yes/No**

Do you have any criminal convictions including spent sentences and cautions? **Yes/No**

Do you have any prosecutions pending? **Yes/No**

18. Declaration

I confirm that the information given in this form are true, complete and accurate and no information requested or other material information has been omitted. I give consent for my personal data to be processed for the purpose of admission.

[FAILURE TO DECLARE ANYTHING RELEVANT, WHICH IS SUBSEQUENTLY DISCOVERED, COULD LEAD TO TERMINATION OF YOUR COURSE.]

Applicant's signature----- **Date**-----

19. Undertaking

We give an undertaking that if admitted, we jointly guarantee that the student shall abide by all the rules and regulations of the Institute and pay prescribed fees and other expenses.

Signature of Parent/Guardian

Signature of Applicant

Date-----

Date-----

VISWASS SCHOOL OF FINANCE
237, Bapuji Nagar, Bhubaneswar 751009

MFC ENTRANCE TEST

Date of Entrance Test _____

Reporting Time : 9 AM

Place of Entrance Test: Vivekananda Institute of Social Work and Social Sciences
237, Bapuji Nagar, Bhubaneswar – 751009

Name _____ Roll No. _____ Signature of the Candidate

Checked by _____

Principal/ Head of the Department

Affix
passport size
photograph
in this space