Sadhana Centre for Management & Leadership Development **(SCMLD)**
Head office & Campus I: 392 A, Mahale Plot, Deep Bungalow-Vetal Chowk Road, Model Colony P.O., Pune 411 016
Tel.: 020-2567 2026 / 7 Tele-Fax : 020-6603 3796
Placement Office & Campus II: Plot No. 3, Street No. 127/1, Mahavir Park, Disha Building, Opposite Hotel Sarja, Croma Road, Aundh, Pune 411007 Tele-Fax: 020-25885061/2
(See note below)
Email : admissions@scmld.org, admissionsscmld@gmail.com Website : www.scmld.org

(SCMLD office use only)
Cash Reciept No.:

Dated:

PRELIMINARY/INITIAL SCREENING (GD) APPLICATION FORM	GD Code (SCMLD office use only):	Appln. No. (SCMLD office use only):

To
The Director, SCMLD, Pune

Dear Sir,

After going through your website I hereby apply for admission to the following program(s) offered by SCMLD / IGNOU as indicated below by: ☑ (Choose only 1, 2 or 3)

1. ☐ Residential **Post Graduate Program in Executive Leadership (PGPEL : 2010-11)**, along with MBA / relevant Diploma Programs of IGNOU : 2010-12, and **Advanced Program in Executive Leadership : 2011-12** subject to my passing PGPEL in 2011 and continuing the IGNOU MBA / Diploma course as the case may be to 2012. I know that I have to go through the bridge program (PGPEL) in May 2010 if I don't secure 75%overall in SCMLD entrance test 2010. I will bear the cost of bridge program if I do not score 75% in entrance exam.

2. ☐ Residential **Advanced Program in Executive Leadership (APEL : 2010-11)**, along with IGNOU MBA(2010-12) / relevant Diploma Program of IGNOU : 2010-11/12 and continuing the IGNOU MBA (2010-12) / Diploma through 2012 as I (strike out which ever is not applicable); I am eligible for APEL as follows (Fill up only (a) or (b))

   (**a**) ☐ I am a Post Graduate in _____ / Graduate with _____ years of work experience in supervisory / executive level, in the functional area of _____ (details of work experience enclosed) : I have passed the PGDBM / CA / ICWA / (any other) _____ of the institution / college (name) _____ in the year _____and if selected I shall attend and clear the 30 day residential bridge program in **May 2010**. I am willing to bear the cost of the bridge program additional to APEL program fee mentioned in the prospectus.

   (**b**) ☐ I have cleared PGPEL of SCMLD batch 2007-08 / 2008-09 / 2009-10 / PGDM batch ☐2004-06 ☐2005-07 ☐2006-08 and I am exempted from bridge program.

3. ☐**MBA / PG Diploma in _____ of IGNOU only** batch 2010-12 as the case maybe, by attending evening / weekend classes. I am aware that except for class sessions for IGNOU curriculum, I will not be eligible for any other inputs of SCMLD and the fee I will be paying will be that prescribed by IGNOU only.

   [IGNOU entrance OPENMAT is in February & August. Course exams are in July & December every year. Graduation marksheets/ pass certificates(may not be degrees) are essential for admission to IGNOU MBA/Diploma programmes. Therefore it is important that you must have Graduation certificates/marksheets and one of the entrance test score cards (see box below) in your possesion by June 2010 to get admitted to IGNOU and to take its December 2010 Semester - I exams of MBA or Diploma **.]**

My score in(fill up which ever is relevant):

CAT held on _____ is ____ percentile/%
ATMA held on _____ is ____ percentile/%
OPENMAT held on _____ is ____ percentile/%
XAT held on _____ is ____ percentile/%
MAT held on _____ is ____ percentile/%
CET of Govt. Of _____ held on _____ is ____ percentile/%

(Photocopy(ies) of the score card(s) is / are enclosed. Original(s) will be submitted at the time of admission to SCMLD for onward submission to IGNOU)

My other particulars are as follows:

1 **Name** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
Leave a blank box between names **(SURNAME)** **(FIRST NAME)** **(MIDDLE NAME)**

Mailing Address: _____

_____

Town / Village _____ **District** _____

State _____ **PIN Code** | | | | | | |

E-Mail: _____ **Mobile No.:** _____

Tel.: (STD. Code _____**) & No.** _____ **FAX No.** _____

Date of Birth | | | | | | | | Date Month Year **Age Completed** (in years) _____ **Gender:** ☐**M** ☐**F**

My latest passport size colour photograph is affixed here.

P.T.O.

For admissions, address all correspondence to Campus I **For placements, address all correspondence to Campus II**

2 **Selection Process Centres** (Tick any one city). Those who miss the process at any centre due to any university or other examinations, can avail of the selection process at Pune (SCMLD campus). Candidates rejected after the GD process in any centre cannot re-appear for the same in any other centre. If detected his / her candidature will stand nullified.

☐ Ahmedabad ☐ Bangalore ☐ Bhopal ☐ Chandigarh ☐ Chennai ☐ Dehradun ☐ Delhi ☐ Gwalior
☐ Hyderabad ☐ Indore ☐ Jaipur ☐ Kanpur ☐ Kochi ☐ Kolkata ☐ Lucknow ☐ Mumbai
☐ Nagpur ☐ Patna ☐ Pune ☐ Raipur

3 **Academic Qualifications**

Academic Level	1. Name of Degree / Diploma / Course 2. Name of Institution & Board / University	1. Yr. of completion & 2. Period	Major Subjects / Specialisation	% Score	Division / Grade
10th Standard (SSC / CBSE / ICSE / Others)	1.	1.			
	2.	2.			
12th Standard (HSC / CBSE / ISCE / Others)	1.	1.			
	2.	2.			
Graduation	1.	1.			
	2.	2.			
Post Graduation)	1.	1.			
	2.	2.			
(Any other) Specify_____	1.	1.			
	2.	2.			

I came to know about SCMLD programs from ☐News paper, namely _____ ☐Friends of mine ☐Relatives ☐Pamphlet / Letter I got from SCMLD ☐Existing SCMLD students ☐Ex-SCMLD students ☐Coaching Institute, namely_____

I wish to join SCMLD because I : _____

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_____.

I hereby declare that the information provided above by me is true and correct to the best of my knowledge. I am aware that any false information provided by me, will result into nullification of my studentship in SCMLD. I know that SCMLD and it's programs are private, autonomous and not affiliated to or recognized/approved by, any university, government or statutory agencies like AICTE/UGC.

Name : _____ Signature : _____

Date : _____ Place : _____

Enclosed: DD No. _____ for Rs. 300/- Dated _____

Enclosure: Nothing as I have paid cost Rs. 300/- under Cash Receipt No. _____ Dated _____ and receipt is retained.

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(See note below)
Email : admissions@scmld.org, admissionsscmld@gmail.com Website : www.scmld.org

(SCMLD office use only)
Cash Reciept No.:
Dated:

PRELIMINARY/INITIAL SCREENING (GD) ADMIT CARD (Candidate's Copy)

SCMLD G.D. Code:

Please carry this to the screening centre. For venue, date and time, please visit our **website www.scmld.org** . Also please bring one attested photocopy each, of your 10th, 12th and Graduation / Post Graduation mark sheets, degrees and other testimonials (awards / medals / achievements) for the initial screening.

Please tick the appropriate programme applicable to you.

1. ☐ **Post Graduate Program in Executive Leadership** (PGPEL 2010-11 along with MBA / PG Diploma programs of IGNOU 2010-12 and APEL 2011-12)
2. ☐ **Advanced Program in Executive Leadership** (APEL 2010-11 along with MBA / PG Diploma Program of IGNOU 2010-12)
3. ☐ **Only MBA / PG Diploma of IGNOU 2010-12**

Applicant's Name
Leave a blank box between names **(SURNAME)** **(FIRST NAME)** **(MIDDLE NAME)**

Address: _____

_____

Town / Village _____ **District** _____

State _____ **PIN Code**

Selection Process Centre (City name) _____

Please affix your latest passport size colour photograph here.

(SCMLD Seal - will be stamped at the venue)

Signature of the candidate
(To be signed in the presence of SCMLD representative at the venue of the Selection Process)

Signature of SCMLD representative
(At the venue of the Selection Process)

Do not post this part of the admit card which should be brought to the venue of the screening

For SCMLD Office Use Only

To be filled in by the applicant and dispatched to SCMLD, Pune along with the initial screening application form duly filled in and a spare passport size photograph as affixed herein, so as to reach SCMLD latest by the dates mentioned on the website.

PRELIMINARY/INITIAL SCREENING (GD) ADMIT CARD (Institute's Copy)

SCMLD G.D. Code.:

Please tick the appropriate programme applicable to you.

1. ☐ **Post Graduate Program in Executive Leadership** (PGPEL 2010-11 along with MBA / PG Diploma programs of IGNOU 2010-12 and APEL 2011-12)
2. ☐ **Advanced Program in Executive Leadership** (APEL 2010-11 along with MBA / PG Diploma Program of IGNOU 2010-12)
3. ☐ **Only MBA / PG Diploma of IGNOU 2010-12**

Applicant's Name
Leave a blank box between names **(SURNAME)** **(FIRST NAME)** **(MIDDLE NAME)**

Address: _____

_____

Town / Village _____ **District** _____

State _____ **PIN Code**

Selection Process Centre (City name) _____

Please affix your latest passport size colour photograph here.

(SCMLD STAMP)

Signature of the candidate
(To be signed in the presence of SCMLD representative at the venue of the Selection Process)

Signature of SCMLD representative
(At the venue of the Selection Process)

Enclosed DD of Rs.300/- for the PRELIMINARY/INITIAL SCREENING (GD) APPLICATION FORM

For SCMLD Office Use Only