

LATE SMT HANJABAI GAHLOT CHARITABLE TRUST



G.I.M.S.R

GAHLOT INSTITUTE OF MANAGEMENT STUDIES & RESEARCH
GAHLOT TECHNICAL EDUCATION COMPLEX
Plot No.59, Sector-14, Koperkhairne, Navi Mumbai 400709

STUDENT REGISTRATION FORM

Time of Visit : _____

Date: _____

1. Name of the Visitor : _____

2. Student's Name: _____

Mobile No.: _____ Residence No. _____

Address: _____

3. Admission Category : Management Quota / Against Vacancy

4. Percentage of Marks obtained in qualifying examination:

HSC (%) _____ CET Score _____ Bachelor's Degree (%) _____

5. Why do you want to take admission in this Institute? _____

Declaration

The Information given above is true to best of my knowledge candidature of the student may be rejected if any information is formed wrong.

Signature of the Student