



## Admission Form

For office Use:

Form No.

Date of Admission:

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passport size  
photograph

The Director  
C/o Faculty of Management Studies  
Chitransh Academy of Travel  
D-15, Basant Vihar, Gwalior, M.P. - 474001  
Website: [www.chitranshonline.in](http://www.chitranshonline.in)  
E-mail: [contact@chitranshonline.in](mailto:contact@chitranshonline.in)

Sir / Madam,

I wish to seek admission in Chitransh Academy of Travel, Gwalior and submit the following particulars for consideration:-

1. Name in full (Capital letters) \_\_\_\_\_
2. Sex \_\_\_\_\_ 3. Marital Status \_\_\_\_\_
4. Date and Place of Birth \_\_\_\_\_
5. Nationality \_\_\_\_\_
6. Permanent Address \_\_\_\_\_
7. E-mail \_\_\_\_\_
8. Father's Name / Husband's Name \_\_\_\_\_
9. Father's / Husband's / Guardian's Occupation & permanent address \_\_\_\_\_  
\_\_\_\_\_
10. Mother's Name \_\_\_\_\_
11. Contact Phone \_\_\_\_\_ Mobile \_\_\_\_\_
12. Are you currently employed yes / No

If yes complete name and address of employer \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

13. Length of service (with dates) \_\_\_\_\_

14. Qualifications

S. No.	Exam / course Passed	Board / University	Year of Passing	Grade / Marks
				Obtained Marks

15. Language (s) known \_\_\_\_\_

16. Proficiency in spoken English Good / Fair / Poor

17. The following certificates must be submitted along with this application:

(1) Two Photostat copies of School / Degree Certificates

(2) Two Photostat copies of Marks / Grade Statements

(3) Two Photostat copies of Date of Birth Certificate

18. Declaration by the Applicant:

- i) The information provided above is true and accurate.
- ii) All documents attached with this Application Form are authentic.
- iii) I further affirm that I have not been involved in any malpractice / use of unfair means (UFM) in any examination taken by me and no judicial proceeding is pending against me.
- iv) I understand that in the event of my not fulfilling all requirements, Chitransh Academy of Travel, Gwalior may not consider / may cancel my candidature.
- v) I declare that I shall submit myself to the disciplinary jurisdiction of the authorities of Academy which may be vested with the powers to exercise discipline under the Act, the Statutes, the Ordinances and the Rules that may be framed by the Academy Board from time to time.
- vi) I have read and understood the guidelines.

Date: \_\_\_\_\_

Place: \_\_\_\_\_

\_\_\_\_\_  
Signature of the applicant