





AIMS TEST FOR MANAGEMENT ADMISSIONS 14th December, 2014; 08th February, 2015; 24th May, 2015 and 26th July, 2015 PARTICIPATION FORM

The Chairperson, ATMA Committee Flat No. 101, Rekha Deluxe Enclave Sangeetha Nagar, Punjagutta Hyderabad – 500 082

i. Institute approved by AICTE

Date:

Yes

No

| Mada | am, | | | | | | | | |
|------|--|-----------------------------------|-------------------------|---------|-----------|---------|----------|----------|-------------|
| | are willing to participate in ATMA (mation: | ONLINE T | EST(S)/P | aper B | ased Te | est and | giving b | elow the | e requested |
| a. | Name of the Institution | : | | | | | | | |
| b. | Name & Designation Of the Head of the Institution | : | | | | | | | |
| C. | Full Address of the Institution | : | | | | | | | |
| | State: | : | | | | | | | |
| d. | Telephone Number(s) | : | | | | | | | |
| | Fax Number(s) | : | | | | | | | |
| | Email ID | : | | | | | | | |
| | Website Address | : | | | | | | | |
| e. | If affiliated to a University, Name of the University | : | | | | | | | |
| f. | Names of the Courses offered And the Year of their approval by AICTE / University | : | | | | | | | |
| g. | ATMA Participation (Tick as A) We agree to Participate in ATMA in our Institute / department | ppropriat e A for admis | e) ssion of c | andidat | es for co | ourses | Yes | | No |
| h. | If yes to (f), Programmes for which Scores will be accepted | ch ATMA | | | : | | | | |

| j. Institute approved by UG | : | | Yes | | No | | | | |
|---|----------|----------------|---------------------------------------|----------------------|----------|------------------------------------|-------------|--|--|
| k. If autonomous (enclose of | : | | Yes | | No | | | | |
| I. Intake capacity per batch | | | : | | | | | | |
| Participation Fee: | | | | | | | | | |
| For AIMS Members (Please tic | rk mark | (√) against th | na tast(s) salacta | ١٩) | | | | | |
| TOT AIMO Members (Flease tic | | | | | | | | | |
| Fee (Rs.) | 14.12 | .2014 | 08.02.2015 | st Dates 24.05.20 | 15 | 26.07.201 | 5 | | |
| 35,000 (All four tests) | | | | | | | | | |
| 30,000 (Any Three tests) | | | | | | | | | |
| 23,000 (Any Two tests) | | | | | | | | | |
| 15,000 (One test) | | | | | | | | | |
| AIMS Membership No: | | | | | | | | | |
| For Non-Members (Please tick mark (✓) against the test(s) selected) Test Dates | | | | | | | | | |
| Fee (Rs.) | 14.12 | 2014 | 08.02.2015 | 24.05.20 | 15 | 26.07.2015 | | | |
| 40,000 (All four tests) | 14.12 | .2014 | 00.02.2013 | 24.03.20 | 13 | 20.07.201 | 3 | | |
| 35,000 (Three tests) | | | | | | | | | |
| 28,000 (Two tests) | | | | | | | | | |
| 20,000 (One test) | | | | | | | | | |
| (Data of all the students that | appeare | ed for the res | pective exam(s) | opted by the | Partic | ipating Institu | ute will be | | |
| Advertisement Tariff: For one full page advertiseme will contain advt(s) of only thos | | | | | | | | | |
| Duration | | Tariff (Rs.) | l l l l l l l l l l l l l l l l l l l | | unig i o | | <i>,.</i> | | |
| November, 2014 to August, 2015 | | 25,000 | - | | | - | | | |
| January, 2015 to August, 2015 | | 20,000 | Or | November, | 2014 t | o June, 201 | 5 | | |
| April, 2015 to August, 2015 | | 15,000 | Or | November, | | | | | |
| June, 2015 to August, 2015 | | 10,000 | Or | November, | 2014 t | o January, 2 | 2015 | | |
| The payment should be made Code: <u>UTIB0000068</u> , quoting: | • | | | | _ | | | | |
| through | | | | | | | | | |
| Demand Draft ((No | | Dated | | for R | s |) in fav | (Rupees | | |
| "Association of Indian Mai Secunderabad)) and sent to THE EXECTUTIVE SECRET DELUXE ENCLAVE, SANGEE | ARY, A | ASSOCIATION | ' drawn on N OF INDIAN | MANAGEME | NT SC | (Bank) p HOOLS, 10 [,] | ayable a | | |
| Also please indicate if you w | ish to l | oe a Compute | erTest Center, \ | with co | mputei | rs. | | | |
| TEST CENTER (YES | / NO |) | | | | | | | |
| Signature of the Head with S | eal | | | | | | | | |