IFHE, Hyderabad (Deemed to be University under Section 3 of the UGC Act, 1956) Dontanapalli, Shankerpalli Road, Hyderabad-501203, Telangana

MBA STUDENT PERSONAL DATA FORM

(TO BE FILLED IN CAPITAL LETTERS ONLY)

STUDENT NAME (AS PER 10TH GRADE SHEET)	Sahil Kadu
DATE OF BIRTH	01-01-2000
ENROLLMENT NO	001
MOBILE NO	9876543210
EMAIL ID	sahilkadu0101@gmail.com
BLOOD GROUP	A+
NATIONALITY / RELIGION	/ Hinduism
FATHER'S NAME	Robert Doe
FATHER'S MOBILE NO	8790744018
FATHER'S EMAIL ID	father@gmail.com
MOTHER'S NAME	Mary Doe
MOTHER'S MOBILE NO	8790744018
MOTHER'S EMAIL ID	father@gmail.com
ADDRESS FOR COMMUNICATION	Hyderabad
LOCAL GUARDIAN'S NAME, MOBILE, EMAIL ID AND ADDRESS	Guardian, 9878676545, guardian@gmail.com, Hyderabad
PARENTS INCOME CATEGORY	☐ Below 5 Lacs ☐ Below 8 Lacs ☐ Below 10 Lacs ☐ Above 10 Lacs
WORK EXPERIENCE IF ANY	✓ 1 year □ 2 years □ 3 years □ 5 years

Instructions:

• Hard copy of the duly filled Personal Data Form is required to be submitted at the time of Registration, failing which Registration will not be allowed. Also, please note all the fields in the form are mandatory.