



Faculty of Management  
**Food & Agri Business School**  
 (Sagar Group of Institutions - Hyderabad)

Campus: "Flame of Forest" Chevella-Urella Road, Urella (PO), Chevella, Hyderabad-501503.

Contact: +91-8886301166, 8886101133 E-mail Id: admissions@fabs.ac.in

Website: www.fabs.ac.in, www.svvr.org

**Application for Admission into AICTE Approved  
 Two Years Post Graduate Diploma in  
 Agri Business and Management  
 PGDM (ABM)**

Paste Your  
 Latest Photo

**Application Fee Rs. 500/-**

Batch: .....

.....  
 Signature of the Applicant

- Name (in block letters as per SSC): .....
- Father's / Guardian Name: ..... Mother's Name: .....
- Father's / Guardian Occupation.....
- Permanent Address: .....  
 .....Pin Code.....
- Address for Correspondence: .....  
 .....Pin Code.....
- Parent Contact No.: ..... Student Contact No.: .....
- E-mail address: ..... Blood Group.....
- Aadhaar No: .....Marital Status: Married  Un Married
- Date of Birth:.....Gender: Male  Female
- Identification marks of the Applicant (I).....  
 (II).....
- Mother Tongue: .....Nationality: .....Religion: .....
- Category: 

OC	BC	SC	ST	PH	Others
----	----	----	----	----	--------

**13. Education Qualifications:**

Course/ Examination	Year of Passing	Specia lization	Marks %	Institution Name & Location	University/ Board
X Class					
XII/Intermediate					
Graduation					
Any other Degrees/ Diploma					

**14. Qualification Test Scores:**

CAT/ MAT/CMAT/ XAT/ATMA	Year of test appeared	Hall Ticket No	Rank	Marks



Faculty of Management  
**Food & Agri Business School**  
(Sagar Group of Institutions - Hyderabad)

**Campus:** "Flame of Forest" Chevella-Urella Road, Urella (PO), Chevella, Hyderabad-501503.

**Contact:** +91-8886301166, 8886101133 **E-mail Id:** admissions@fabs.ac.in

**Website:** www.fabs.ac.in, www.svvr.org

---

### DECLARATION /UNDERTAKING FROM THE STUDENT

I, .....S/o, D/o .....

Program..... Student of Food & Agri Business School, Chevella, permanent resident of .....

do hereby undertake on this Date..... the following:-

1. I, hereby, declare that, the entries made by me in the Application Form are complete and true to the best of my knowledge and based on records.
2. I, hereby, undertake to present the original documents immediately upon demand by the concerned authorities of the Institute.
3. I, hereby, promise to abide by the admissible rules and regulations, concerning discipline, attendance, etc. of the Institute (SGI Chevella), and also to follow the Code of Conduct prescribed for the Students of the Institute, as in force from time to time and subsequent changes/modifications/amendment made there to. I acknowledge that, the Institute has the authority for taking punitive actions against me for violation and/or non-compliance of the same.
4. I, understand that, attendance in classes is compulsory as per AICTE norms and I commit myself to adhere to the same. I also understand, in case my attendance falls short, for any reason, the competent authority of the Institute may take such punitive action against me, as may be deemed fit and proper. As per AICTE norms.
5. I, hereby declare that, I will neither join in any coercive agitation/strike for the purpose of forcing the authorities of the Institute to solve any problem, nor I will participate in any activity which has a tendency to disturb the peace and tranquility of life of the SGI Chevella campus and/or its Hostel premises.
6. I, hereby declare that, neither I will indulge in, nor tolerate ragging, in any form, even in words or intentions nor I accept to give an undertaking in the prescribed format for the same.
7. I, also declare that, I will not indulge in any consumption/ carrying of alcohol or narcotic drugs within the SGI premises.
8. That the College is at liberty to cancel/withdrawal the Admission of the student, if it was found that I am indulging in any acts prohibited under law, whether under act 26 of 1997, any other central or state enactment.
9. I, understand that as per rules and regulations of the Institute, I will not be permitted to possess or use any motorized vehicle inside the Institute campus, unless I am permitted to do so by a written prior authorization from the Director (Students' Affairs).
10. I, hereby declare that, I shall be solely responsible for my involvement in any kind of undesirable / in disciplinary activities outside the campus, and shall be liable for punishment as per the law of the land. I, further understand that, the Institute shall in no way provide any support to me and will not be held responsible for my any such action.
11. I, also declare that, I am not suffering from any serious/contagious ailment and/or any psychiatric / psychological disorder.
12. I, further declare that, my admission may be cancelled, at any stage, if I am found ineligible and/or the information's provided by me are found to be incorrect.
13. I, hereby undertake to inform the Institute, about any changes in information submitted by me, in the Application Form and any other documents, including change in addresses and phone nos., from time to time.

**Date:**

**Signature of Student**

### DECLARATION BY PARENT/ GUARDIAN

I,....., (Mother / Father / Guardian) here by fully endorse the above undertaking/declaration given by my child/ward. And I will endeavor to induce my child/ward to do is/her best to observe the above stated undertaking in words and spirit.

**Date:**

**Signature of Mother / Father / Guardian**



Faculty of Management  
**Food & Agri Business School**  
(Sagar Group of Institutions - Hyderabad)

**Campus:** "Flame of Forest" Chevella-Urella Road, Urella (PO), Chevella, Hyderabad-501503.

**Contact:** +91-8886301166, 8886101133 **E-mail Id:** admissions@fabs.ac.in

**Website:** www.fabs.ac.in, www.svvr.org

---

**FEE COMMITMENT FORM**

1. Name of the Candidate: .....
2. Name of the Parent / Guardian: .....
3. Student Phone No: ..... Parent Phone No: .....
4. Course Admitted : .....
5. Fee Commitment:

S No	1 <sup>st</sup> Year	2 <sup>nd</sup> Year
Admission Acceptance Fee	25,000	.....
Tuition Fee	1,75,000	1,75,000
Hostel Fee	55,000	55,000
Total Fee	2,55,000	2,30,000

6. Amount paid for I- year : \_\_\_\_\_

7. Balance Fee Due for I-year : \_\_\_\_\_

- *The remaining balance of 1st year fee will be paid by me at the time of commencement of 1st year classes.*
- *The fee for 2<sup>nd</sup> year will be paid by me at the time of commencement of respective academic year.*

I accept the above fee commitments: otherwise my seat and the amount paid will be forfeited.

**Note: Fee once paid will not be refunded under any circumstances**

**Signature of the Student**

**Signature of the Parent / Guardian**

**Date:**



Faculty of Management  
**Food & Agri Business School**

(Sagar Group of Institutions - Hyderabad)

**Campus:** "Flame of Forest" Chevella-Urella Road, Urella (PO), Chevella, Hyderabad-501503.

**Contact:** +91-8886301166, 8886101133 **E-mail Id:** admissions@fabs.ac.in

**Website:** [www.fabs.ac.in](http://www.fabs.ac.in), [www.svvr.org](http://www.svvr.org)

---

**For Office Use:**

**Enclosures:**

<b>CAT/ MAT/CMAT/ XAT/ATMA Score Card</b>	
<b>X Class Marks Memo</b>	
<b>XII/ Intermediate Marks Memo</b>	
<b>Degree Consolidated Marks Memo</b>	
<b>Provisional Degree Certificate</b>	
<b>Degree Transfer Certificate</b>	
<b>Migration Certificate</b>	
<b>Bonafide certificates from Up to X:</b>	
<b>Intermediate:</b>	
<b>Degree:</b>	
<b>Aadhar Card Xerox</b>	
<b>Recent passport size colour photographs (2)</b>	
<b>02 Sets of Xerox copy of above certificates</b>	

**Receiver's Signature**

**Student Signature**

**Date:**