



Association of BRICS Business Schools

APPLICATION FOR MEMBERSHIP

For the year/Life Membership

As one of the Institutions engaged in management education in India, we hereby apply for the membership of ABBS for the year/Life Membership. In connection with this membership application, we furnish below the relevant details about our institution.

Institutional Profile

Name of the Institution :

Full address of the Institution :
.....
.....

Name of the University :
[if affiliated to a University]

Basic Data

a. Type of Institution [Tick as applicable]

- Government established & funded
- University Department
- University Affiliated College
- Private / Independent

b. Year of founding as a Management Education Institution / Department.

Year :
Website :

c. Courses Offered: Title: Duration: Number of Admissions

Full-time :
Part-time :

d. Name of the Head of the Institution :

Designation :
Office Tel.No. [With area code] :
Office Fax No. :
Mobile No. : E-mail ID :

e. Total number of employees

Full-time faculty :
Part-time faculty :
Visiting faculty :
Support Staff :

f. Type of membership desired

Lifetime Membership / for years.

DD Amount DD No..... Dated
drawn on

DD to be drawn in favour of “Association of BRICS B-Schools” payable at Bangalore.

Authorized Signatory

Signature:

Date:

Place: