Post Graduate Program for Executives for Visionary Leadership in Manufacturing

PGPEX-VLM: Admissions (2017-18)







INDIAN INSTITUTE OF MANAGEMENT CALCUTTA

INDIAN INSTITUTE OF TECHNOLOGY KANPUR

INDIAN INSTITUTE OF TECHNOLOGY MADRAS

1. Persor	nal Informati	ion		.									
Name									Affi	c self-att	ested		
Hame	First name		Middle name			Last nan	ne		re	cent col	our		
Gender				Date of Birth				/ /	1		ŀ	motogra	pii
Male		Fe	emale	Date of Birtin			dd/mm/yyyy						
Parents' Name Father					Mother								
Nationality		Place of Birth	1		City/Town				Country				
Passport Nu	mber			,			Doto of	: Eveley				/ /	1
Place of Issu	ie						Date of	Expiry			dd/mm/yyyy		уу
	(Study visit al	broad is	compulso	ory part of the progr	ram. Attested copy	of the p	assport mu	ıst be subm	itted wit	h the ap	oplication	.)	
Other Citizer	nship, if any	,											
Country of P	ermanent R	eside	nce				Country of Current Residence						
Mother Tong	jue												
Other Langu	ages knowr	1											
Marital Statu	ıs			Single		Marrie	ed			Other	S		
2. Contac	et Informatio	on											
		Company											
Present Bus	inoss	Addr	ress										
Address	111622	City					Postal Code						
		City											
		State	•				Country						
		Phor	ne				Fax						
		A -1 -1-											
		Addr	ress										
Permanent A	Address	City					Postal	Code					
		State	•				Countr	у					
	Phone						Fax						

Dueferred							
Preferred Communication Address	Present Bu	siness Address	Permane	Permanent Address		Address given below	
	Address						
	Address						
	City			Postal code	e		
State				Country			
	Phone			Fax			
Email Address				Alternate Email Address			
Preferred Phone Number				Alternate P	hone Number		
3. Application Fees INR 2,500/- (Non refun India. Demand Draft sho							
Demand Draft No.			Date		/ /		
Dank dataila				dd/mm/yyyy			
Bank details							
4. Funding of Progr	am						
The course fee for the F Furthermore Rs. 20,000/- *Education loans are avail	(Rupees twenty t	housand) has to be	paid as refundable o	caution deposi	it at the time of regi		
How you propose to pa	y for this						
course ?		Bank	Own fund	Company sponsorship / Other sources(Please		sources(Please specify)	
How did you come to keep PGPEX-VLM ?	now about						
A				V			
Are you a re-applicant 1	'	No	Yes	Year of pre	vious application	1	
5. Category of Appli	cation						
Self Sponsored –	will resign	Self Sponso	red – on Study Leave	re Sponsored			
 (a) "Self Sponsored – will resign": In case of candidates who plan to resign from service, letter of resignation and release from employer is to be produced in original on or before registration. (b) "Self Sponsored- on Study Leave": Candidates in service applying under this category must submit with application form, attested copy of the application for study leave bearing signature and seal of the employer along with letter or endorsement of consent of the employer on the application. (c) "Sponsored": Candidates applying under Sponsored category must submit letter of intent of sponsorship issued by the employer with the application form and submit attested copy of letter/bond from the employer containing the details of terms and conditions and extent of sponsorship on or before registration. 							

6. Academic Qualifications							
Please attach attested/notarize	ed copies of transc	cripts of all examinatio	ns passed. Use extra s	sheets, if necessary.			
Institution name with	Exam/ Degree		Dates attended	I	CGPA/	Rank/Division	
full address	(Major)	From	То	Year of passing	Percentage	Kalikibivisioli	
	Secondary (Class 10 or equivalent)	/ /	/ /				
	Higher Secondary (Class 12 or equivalent)	/ /	/ /				
	Engineering Degree	/ /	/ /				
	Whether you ha attempt ?	ve passed any subjec	ts in more than one	YES] NO		
	If YES, please n	nention the subjects					
	Masters Degree / Post Graduate Degree	/ /	/ /				
	Whether you ha attempt ?	ve passed any subjec	ts in more than one	YES] NO		
	If YES, please n	nention the subjects					
7. Test Scores	7. Test Scores *GMAT - Graduate Managemen			st (taken within last	36 months)		
Registration num		number					
GMAT	Test date		/ /				
			dd/mm/yyyy				
Graduate	Verbal score			Percentile			
Management Admission Test	Quantitative	score		Percentile			
	Overall score	9		Percentile			
	AWA score			Percentile			

*GRE - Graduate Record Examination (taken within last 36 months) Registration number Test date GRE dd/mm/yyyy **Graduate Record** Percentile **Verbal Reasoning Score Examination Quantitative Score Percentile** Overall score Percentile **AWA** score Percentile **Work Experience** Please attach attested/notarized copies of supporting documents. Use extra sheets, if necessary. Aggregate full time workexperience (In completed years and months as on Years Months 28th February, 2017) Managerial work-experience (In completed years and months out of aggregate work-experience given above) Years Months **Company Name** Industry **Address Postal Code** State Country Tel. **Fax** Your current employer E-Mail Website **Total employees** Annual sales (INR) Main field of Activity Job title / Designation Area of expertise No. of years in this position Your current job No. of reportees Assets under your arrangement Name, Designation, Postal Address, Email and Phone details Your direct supervisor To whom does he/she report

Basic	y certificate for the month preceding the D.A.		Total	
Other Information				
	rovide you with			
s your employer prepared to provide you with acilities/access to undertake in-company project during inal months of the program ?				
months of the program?		Yes	No	To be confirmed
Job Description				
e give a description of your exiption. Use extra sheets, if ne	xact job, including nature of work, maj	ior responsibilities etc. (If poss	sible, draw an organization ch	nart and give your job
puon. Ose extra sneets, ii nei	Jessary).			

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9.	Card	-1-1	Su		161	a.

Please provide chronological details of your work experience below. List your present position first. Kindly note that you will be required to submit a certificate of employment from your last employer in case you are granted admission. Use extra sheets, if necessary.

	Name of organization	
	Industry	
	Complete address including contact numbers	
	Website address	
1	Starting date	
•	Ending date	
	Last designation	
	Functional area of work	
	Last drawn salary	
	International exposure (if any)	
	Reason for leaving	
	Name of organization	
	Industry	
	Complete address including contact numbers	
	Website address	
2	Starting date	1 1
_	Ending date	
ŀ	Last designation	
	Functional area of work	
	Last drawn salary International exposure (if any)	
	Reason for leaving	
	Name of organization	
	Industry	
	Complete address including contact numbers	
	Website address	
3	Starting date	
3	Ending date	
	Last designation	
	Functional area of work	
	Last drawn salary	
	International exposure (if any)	
	Reason for leaving	

	Name of organization		
	Industry		
	Complete address including contact numbers		
	Website address		
	Starting date	/	/
	Ending date	/	/
4	Last designation		
	Functional area of work		
	Last drawn salary		
	International exposure (if any)		
	Reason for leaving		
	Name of organization		
	Industry		
	Complete address including contact numbers		
	Website address		
5	Starting date	/	/
J	Ending date	/	/
	Last designation		
	Functional area of work		
	Last drawn salary		
	International exposure (if any)		
	Reason for leaving		
1	0. Activities and Interests		

Please list, in order of importance to you, any extra-curricular activities in which you are/have been involved (i.e., sports, politics, community activities, hobbies etc.) Use extra sheets, if necessary.

Activity/Interact	Du	ıration	Loyal of involvement / achievements at	
Activity/Interest	From	То	Level of involvement / achievements, etc.	

11. Statement of Purpose						
The Statement of Purpose and Objectives for joining PGPEX-VLM - is your opportunity to inform the faculty reviewers of your qualifications, motivation, and potential to make a contribution to the field of manufacturing. Use extra sheet, if necessary.						

12. Essay	
Describe three major activities you performed in your workplace in the last five years which will help us assess your abilities and strengths. Write a detail essay on the most important activity performed. Use extra sheet, if necessary.	led

13. References

Two letters of recommendation in the format given must be sent to the Institute within the application deadline date. The recommenders should separately seal the envelopes and sign on the flap.

Please list below the name and complete address of each person to whom you have given a recommendation form. Each should be well acquainted with your intellectual abilities, academic performance, and personal character. At least one of these two letters should be by someone from industry who is familiar with your professional achievements.

	Recommender - 1
Name	
Complete address	
Organization	
Relationship with applicant	
Email	
Mobile	
Phone	
Fax	
	Recommender - 2
Name	
Complete address	
Organization	
Relationship with applicant	
Email	
Mobile	
Phone	
Fax	

Recommender may send the scanned copy of the Recommendation Letter duly signed by him/her via e-mail directly to vlmp@iitk.ac.in

Note: Please note that the Institute will not be responsible if the recommendation letter is not received within the due date (either hard copy or e-mail). In the absence of the recommendation letter within due date, the application is liable to be rejected.

13. (a) Letter of Recommendation - 1								
	This section	is to be comp	leted by the R	Recommender.				
How long have you known the applicant?								
In what capacity have you known the applicant?								
Based on your experience, rate professional standing.	ased on your experience, rate the applicant in the following areas vis-à-vis persons of similar academic and rofessional standing.							
	Truly exceptional (Top 2%)	Exceptional (Top 10%)	Very good (Top 25%)	Good (Middle 50%)	Below average (Lower 25%)	Can't say		
Initiative								
Flexibility								
Maturity compared to peers								
Oral communication skills								
Written communication skills								
Ability to work with others								
Ability to accept constructive feedback and learn from the same								
Ability to understand others' viewpoints								
Ability to finish work in time								
Self confidence								
Leadership								

Please fill out the following information and / or write a separate Letter of Recommendation if necessary.			
Please describe the particular talents, strengths, and weaknesses of the applicant. If you have worked with the applicant on any type of special project, please give an evaluation of his/her performance. Please indicate any favorable or unfavorable indications of the applicant's leadership potential and his/her ability to do work independently. Please include any additional information that you believe is relevant. Use extra sheets, if necessary.			
Name :	Signature with office seal :	Date :	
Designation :	Telephone No.:	Fax No. :	
F-Mail			

13. (b) Letter of Recommendation - 2						
This section is to be completed by the Recommender.						
How long have you known the applicant?						
In what capacity have you known the applicant ?						
Based on your experience, rate professional standing.	e the applican	t in the followi	ng areas vis-à	-vis persons of s	similar academic	and
	Truly exceptional (Top 2%)	Exceptional (Top 10%)	Very good (Top 25%)	Good (Middle 50%)	Below average (Lower 25%)	Can't say
Initiative						
Flexibility						
Maturity compared to peers						
Oral communication skills						
Written communication skills						
Ability to work with others						
Ability to accept constructive feedback and learn from the same						
Ability to understand others' viewpoints						
Ability to finish work in time						
Self confidence						
Leadership						

Please fill out t	he following informatio	n and / or write a	separate Letter of Recon	nmendation if necess	sary.
type of special pof the applicant	project, please give an ev	raluation of his/her p d his/her ability to d	nesses of the applicant. If performance. Please indicate work independently. Please indicate work independently.	ate any favorable or u	nfavorable indications
Nam-		Signature with		Data	
Name :		office seal :		Date :	
Designation :		Telephone No.:		Fax No. :	
Email id :					

14. Application Submission

Please send the completely filled in application form along with GMAT/GRE score, two recommendation letters, required documents if any, and application fee, in the form of Demand Draft drawn in favor of "Indian Institute of Technology, Kanpur" payable at Kanpur, India, to the following address:

VLFM Office Department of Industrial & Management Engineering Indian Institute of Technology Kanpur Kanpur, Uttar Pradesh 208016 India

E-Mail: vlmp@iitk.ac.in

Tel: +91-512-2596590 / 2597376

The completed application form should reach Indian Institute of Technology, Kanpur by 07 December, 2016

15. Disclaimer and Signature

I certify that the information provided here is true and complete to the best of my knowledge. If this application leads to an offer of admission, I understand that false or misleading information may result in the cancellation of my candidature.

Signature in full by the Applicant				
Date		Place		