

Institute of Business and Computer Studies

**REGISTRATION FORM**

**BBA PROGRAM**

Kalinga Nagar, Ghatikia, Bhubaneswar, India Phone: +91-674- 2384326



Name : \_\_\_\_\_ Fathers name : \_\_\_\_\_

Gender : \_\_\_\_\_ Date of Birth : \_\_\_\_\_

Phone no. : \_\_\_\_\_ Mobile No. : \_\_\_\_\_

Email –ID : \_\_\_\_\_

**Communication Address :**

C/o : \_\_\_\_\_

At : \_\_\_\_\_

P.O. : \_\_\_\_\_

PS.: \_\_\_\_\_

City: \_\_\_\_\_

District: \_\_\_\_\_

Pin Code : \_\_\_\_\_

State : \_\_\_\_\_

**Educational Qualifications :**

Exam	Course	Year	Board / University	% of Mark
10 th (Matriculation)				
+2 (Intermediate)				
Any other or Equivalent				