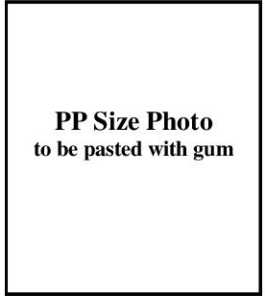




TRIBHUVAN UNIVERSITY
FACULTY OF MANAGEMENT
OFFICE OF THE DEAN

CENTRAL MANAGEMENT ADMISSION TEST (CMAT)
FOR BBA / BIM / BTTM / BHM PROGRAMME

TEST REQUEST FORM 2017



CMAT Roll No.(to be filled by Campus)

Name (in English)

Name (in Devanagari) Sex :

Permanent Address District: Zone:

Local Address
 (if different from permanent address) Tel. No.

EDUCATION REORD:

S. L. C.: Year Board Division Percentage

P. C. L. / +2 Or Equivalent: Year University / Board

Division Percentage

T. U. Regd. No. Name of the Campus

Signature of the Student Date:

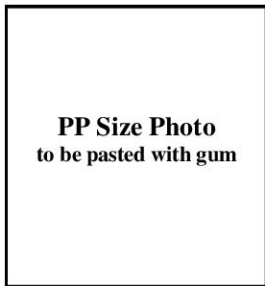
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CENTRAL MANAGEMENT ADMISSION TEST (CMAT)
FOR BBA / BIM / BTTM / BHM PROGRAMME

ADMISSION CARD - 2017



CMAT Roll No. (to be filled by Campus)

Name (in English)

Test Center:

Test Date: Time:

Signature of the Student Signature of the Designated Authority