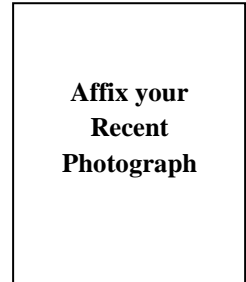

Application to the Grow Your Business Certification Programme

Details of Applicant

Name _____
 Academic Qualification _____ Date of Birth _____
 Mobile number _____ Alternate number _____
 Email Id _____
 Mailing Address _____
 How did you come to know of this programme? _____



Details of Venture

Name of Venture: _____ GST Number: _____
 Website link _____ Your Designation: _____

Date of Establishment _____ Have you started this venture? _____

Industry (for eg: Textile, Pharmaceuticals, IT Services etc.) _____

Ownership Type -Sole Proprietorship/ LLP/ Partnership/ Pvt. Ltd/ Public Ltd/ Any other _____

Employees in Top Management	
Employees in Supervisory Levels	
Total Employees	
Turnover for the year 2020-21 (Rs. in crores)	

Describe your business in brief: _____

Kindly share the soft copy of the completed application form at gyb@spjimr.org and the application fee of Rs 900 can be transferred via NEFT / IMPS / UPI.

Bank Details:

Name of the Beneficiary	Bharatiya Vidya Bhavan's S.P. Jain Institute of Management & Research
Name of the Bank & Branch	Indian Bank, Bhavan's Campus Branch, Andheri (W),
NEFT / RTGS IFSC Code.	IDIB000 B092
Account Type	Savings Bank
Account No.	430392441

Declaration

All entries filled up above are true to the best of my knowledge and belief.

Signature: _____ Place: _____ Date: _____