

## FLAME UNIVERSITY

<b>APPLICATION CUM NOMINATION FORM</b>							
Programme Title	<b>FLAME Investment Lab With The Masters – Invest In Yourself</b>						
Date	6-10 July, 2016						
<b>Please email the completed form to: <a href="mailto:fil@flame.edu.in">fil@flame.edu.in</a></b> For queries, please call toll-free at 1-800-209-4567							
TO BE FILLED IN BY THE Applicant							
<b>General Information</b>							
Name							
Male	<input type="checkbox"/>	Female	<input type="checkbox"/>	Age	<input type="text"/>	Date of Birth	<input type="text"/>
Designation:							
Organization:							
Address for communication:							
City	<input type="text"/>	Pin	<input type="text"/>	Fax	<input type="text"/>		
Phone	(Office): <input type="text"/>		(Residence): <input type="text"/>				
Email	<input type="text"/>			Mobile	<input type="text"/>		
Description of present responsibilities		<input type="text"/>					
Description of Past responsibilities		<input type="text"/>					
Designation of executive to whom you report		<input type="text"/>					
Qualification							
Degree	Subject(s)	Year	College/University				
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>				
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>				
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>				

Work experience			
Organization	Position	Years of experience	Gross Salary

What are your expectations from this programme? Why do you want to attend this programme? How do you see it contributing to your overall development?

A)

B)

C)

What are the key functional areas/ skills which require constant upgrade at your end?	

Have you attended the FLAME Investment Lab With The Masters programme earlier? (Yes/No)
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**Personal Declaration:**

I hereby certify that I have provided accurate information in this application. I am aware that any misrepresentation or omission of facts in my application will justify the denial of admission or withdrawal of admission from this programme.

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

<b>TO BE FILLED IN BY THE SPONSOR/EMPLOYER</b>
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Name of the sponsor		Designation	
Organization			
Address for communication			
		City	PIN
Phone		Fax	Email
<b>Information on Organization</b>			
Total AUM (last year)		Total Employee Count (last year)	

**Please indicate the areas of training needed by your organization on an ongoing basis:**

- Economics \_\_\_\_\_
- Portfolio management, asset allocation & risk management \_\_\_\_\_
- Behavioral Finance \_\_\_\_\_
- Valuation \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Payment Details: Cheque / DD No. \_\_\_\_\_ Date \_\_\_\_\_ Amount \_\_\_\_\_

Bank \_\_\_\_\_

**Fees should be made payable to “FLAME University Pune” at Pune.**

**Please send your application and payment to: FLAME Investment Lab, FLAME University, 401, Phoenix Complex, Bund Garden Road, Opposite Residency Club, Pune 411001, Maharashtra, India. Please write the applicant name and “FLAME Investment Lab” at the back of the demand draft/cheque. Applications without the payment will not be accepted.**

Please note that in the event of cancellation, the following cancellation fee schedule will apply:

- At least 3 weeks before the start date: No cancellation fees
- At least 2 weeks before the start date: Half programme fees will be deducted
- Less than 2 week before the start date: Full programme fees will be deducted