



ALL INDIA MANAGEMENT ASSOCIATION



APPLICATION FORM FOR ACCREDITED MANAGEMENT TEACHER (AMT)

Attach one passport size recent photograph

Registration No. _____ (To be filled in by CMS)

PROFILE OF THE APPLICANT

Please fill the form in BLOCK LETTERS leaving one space between words.

Name (MR/ MRS/MISS/DR/PROF)

Name input grid

Date of Birth:

Age (Yrs):

Date of Birth DD grid

Date of Birth MM grid

Date of Birth YYYY grid

Age (Yrs) grid

Address Details

Address Details table with fields: Designation, Organization Address, Office Tel Number, Residence Address, Res Tel Number, Email

ACADEMIC ACHIEVEMENTS

Table with 6 columns: Level, Name of the Degree/ Diploma, Subjects, Month & Year of Passing, Name of the University/ Board, Percentage of marks. Rows include Graduation, Post Graduation, Research, Any Other.

ADDITIONAL INFORMATION

| | |
|--|--|
| Merit Scholarships/ Fellowship/Awards | |
| Research / Science Publications | |
| Membership of Professional Bodies | |

PROFESSIONAL EXPERIENCE

| Category | Organization | Designation | Duration of Employment | | Nature of Responsibilities |
|---------------------|--------------|-------------|------------------------|-----------|----------------------------|
| | | | From (Year) | To (Year) | |
| Teaching | | | | | |
| Research | | | | | |
| Training | | | | | |
| Consultancy | | | | | |
| Managerial | | | | | |
| Overseas Assignment | | | | | |

SELECT YOUR AREA OF SPECIALIZATION

| | |
|-----------------------------------|--|
| Seeking AMT in the area of | |
|-----------------------------------|--|

(Primary Area of Specialization -Use Codes given on the Left Hand Side. The Certificate will be issued in the Area / Specialization Mentioned Only)

| OTHER AREAS OF INTEREST | CODE | First | | | Second | | | Third | | |
|-------------------------|------|-------|--|--|--------|--|--|-------|--|--|
| | | | | | | | | | | |

Single digit figures denote broad areas double-digit figures denote areas of finer specialization within each broad area. Three digits denote sectoral specialization. Use 09,19,29 etc. Specify subjects not mentioned in the list in words.

| 0 | GENERAL MANAGEMENT |
|----|---|
| 01 | Business Environment |
| 02 | Business Policy |
| 03 | Corporate Governance |
| 04 | Corporate Planning & Strategy |
| 05 | Office Management |
| 06 | Principles / Process of Management |
| 07 | Public Administration & Policy |
| 08 | Values & Business Ethics |
| 09 | Life Skills (Business Communication, Personality Development Interpersonal Skills, Leadership & Teambuilding) |

| 1 | ECONOMICS |
|----|-------------------------|
| 11 | Indian Economy |
| 12 | Industrial Economics |
| 13 | International Economics |
| 14 | Macro Economics |
| 15 | Managerial Economics |
| 16 | Micro Economics |
| 17 | Public Finance |

| 2 | QUANTITATIVE TECHNIQUES |
|----|----------------------------|
| 21 | Business Mathematics |
| 22 | Business Statistics |
| 23 | Decision Theory & Analysis |
| 24 | Econometric |
| 25 | Operation Research |
| 26 | Research Methodology |
| | |

| 3 | FINANCE |
|----|--|
| 31 | Accounting & Book Keeping |
| 32 | Banking |
| 33 | Corporate Finance |
| 34 | Cost & Management Accounting |
| 35 | Financial Management |
| 36 | Investment Analysis & Portfolio Management |
| 37 | Risk Management |

| 4 | Human Resource Management |
|----|------------------------------|
| 41 | Compensation and Benefits |
| 42 | Employee and Labor Relations |
| 43 | Manpower Planning |
| 44 | Performance Appraisals |
| 45 | Safety and Health |
| 46 | Training and Development |

| 5 | LEGAL SYSTEMS |
|----|-------------------|
| 51 | Business Law |
| 52 | Labour Laws |
| 53 | Business Taxation |
| | |
| | |
| | |

| 6 | BEHAVIOURAL SCIENCE |
|----|--------------------------|
| 61 | Industrial Psychology |
| 62 | Organizational Behavior |
| 63 | Group Dynamics |
| 64 | Organization Development |
| 65 | Industrial Psychology |
| 66 | Organizational Behavior |

| 7 | PRODUCTION & OPERATIONS MANAGEMENT |
|----|------------------------------------|
| 71 | Industrial Engineering |
| 72 | Maintenance Management |
| 73 | Materials & Logistics Management |
| 74 | Operations Research |
| 75 | Production Planning & Control |
| 76 | Project Management |
| 77 | Purchase & Supply Chain Management |
| 78 | Quality Control |
| 79 | Value Analysis & Engineering |

| 8 | INFORMATION TECHNOLOGY |
|----|---|
| 81 | Business Process Reengineering |
| 82 | Cyber Law |
| 83 | Electronic Business Systems |
| 84 | Electronic Data Processing |
| 85 | Enterprise System Design & Implementation |
| 86 | Management Information System |
| 87 | System Analysis Design |

| 9 | MARKETING MANAGEMENT |
|----|---|
| 91 | Advertising Management |
| 92 | Business to Business Marketing |
| 93 | Consumer Behaviour & Customer Relationship Management |
| 94 | International Marketing |
| 95 | Marketing Research |
| 96 | Pricing & Product Management |
| 97 | Rural Marketing |
| 98 | Sales & Distribution Management |
| 99 | Services Marketing |

| 10 | SECTORIAL SPECIALIZATION |
|-----|---------------------------------------|
| 101 | Banking Management |
| 102 | Education Management |
| 103 | Entrepreneurship Development |
| 104 | Health Care System |
| 105 | Hotel & Tourism Management |
| 106 | Insurance Management |
| 107 | Management & Rural Development |
| 108 | Management of Agricultural Sectors |
| 109 | Management of Cooperatives |
| 110 | Management of Foreign Trade |
| 111 | Management of Public Utility Systems |
| 112 | Management of Services |
| 113 | Management of Technology & Innovation |
| 114 | Public Enterprises |
| 115 | Retail Management |
| 116 | Small Business Management |
| 117 | Water Resource Management |

Have you been associated with AIMA before? If yes, please give details: _____

Reference: - (Please give name and full official address with telephone numbers & email)

1. _____

2. _____

3. _____

Give Delhi Contact Tele. No. / address if any: _____

Specify if applied for AMT earlier, YES NO and if yes then give date of application:

AMT REGISTRATION FEE: Rs.2500/-, which is a one-time fee. Rs.1500/- is refunded if the candidate does not get accreditation. The payment is to be made in favour of AIMA CMS, payable at New Delhi.

D/D or Cheque details _____

Declaration:

I hereby certify that the details given above are true and correct to the best of my knowledge.

Signature _____

Date _____

Please mail to:

Manager AMT
All India Management Association
Centre for Management Services
Management House, 14 Institutional Area Lodi Road,
New Delhi-110003
Phone: 011-24634026 (D), 24617354 (Extn: 450, 455)
Fax: 011-24626689
Email: bsingh@aima-ind.org, ssoni@aima-ind.org