

Department of Commerce & Business Management
Faculty of Commerce & Management
Integral University, Lucknow

B.Com (Hons) Specialization Form , Batch_____

Name: _____ **Father's Name:** _____
Address: _____ **Mobile No:** _____
Enrolment No: _____ **Roll No:** _____ **Group:** _____
Specialization: _____

Group 1

Financial Management

- 1- Capital & Money Market
- 2- Investment Decision and Portfolio Management

Group 2

Marketing Management

- 1- Marketing Communication
- 2- International Marketing Management

Group 3

Human Resource

- 1- Industrial Relation
- 2- Organizational Development

Note: The student is required to opt only one group (Two papers) under specialization from above Three groups by putting tick mark in the box provided.

Signature: _____

Name: _____

(For Office use only)

Name: _____ **Fathers Name:** _____
Address: _____ **Mobile No:** _____
Enrolment No: _____ **Roll No:** _____ **Group:** _____
Specialization: _____ (Approved/Rejected)

Signature of the Dean, (FCM)

Signature of the HoD,(DCBM)