



S.No. 2/3/4, Laxmi Nagar, Kondhwa Budruk, Pune - 411 048.

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FORM NO

PROVISIONAL ADMISSION FORM

1. Application Details

Academic Year	Application Date	Discipline		Programme
		<input type="checkbox"/> Art	<input type="checkbox"/> Management	_____
		<input type="checkbox"/> Commerce	<input type="checkbox"/> Humanities & Social Sciences	_____
		<input type="checkbox"/> Science	<input type="checkbox"/> Journalism & Mass Communication	_____
		<input type="checkbox"/> Technology	<input type="checkbox"/> Mathematics & Statistics	_____
		<input type="checkbox"/> Design		_____

2. Candidates Name in Full (As per qualifying Mark Sheet)

Last Name : _____

First Name : _____

Middle Name : _____

Mother's Name : _____

Full Name (Devnagari) : _____

2. Address for Correspondence : _____

City _____ District _____ State _____ PIN _____

3. Telephone No. (with STD) : _____ Email : _____

Mobile No. (1) : _____ Mobile No. (2) : _____

4. Personal Information

Gender : Female Male

Blood Group : _____ Date of Birth : _____

Passport No. : _____ PAN : _____

Adhar No. : _____ Domicile State : _____

Religion : _____ Caste : _____

Category : VJ/DT (A) N.T.(B) N.T.(C) N.T.(D) O.B.C. S.B.C.
 S.C. S.T. OPEN MARATHA MUSLIM GENERAL

5. Qualification (As applicable)

Particulars	Examination	Special Subject	Institute	University / Board	Year of Passing	Percentage / CGPA	Class / Grade
S.S.C.							
H.S.C.							
Diploma							
DEGREE							
MASTER'S							
P.G. Diploma							

Undertaking

I the undersigned hereby confirm that the information given above in the admission form is complete and true. I undertake the responsibility to communicate any change to the information mentioned in the admission form, to the concerned authorities of the University. I undertake to submit required certificates / documents to the University within stipulated time for various purposes. I undertake to complete the formalities regarding eligibility. I am aware that the present admission is provisional and subject to final confirmation (grant of eligibility) by the concerned authorities of the University. I am also aware that if for any reason, the eligibility is not granted by the concerned authorities of University, then my admission will be cancelled.

Name of the Candidate : _____ Signature : _____

For Office Use Only – Information to be filled by Admission officer.

Academic Year	Admission Round	Merit No.	Discipline	Programme	Student Category	Domicile State	Verified By Counselor
Entrance Test	Entrance Test Score			Qualifying Examination			Admission In-charge
	Marks	Out of	Percentile	Examination	University / Board	Percentage	

Fees Applicable	Fees Paid	Receipt No.	Balance Fees

Admission Remarks : _____

Signature (Registrar)