

8. Declaration by Student

I hereby declare that I have read the rules related to admission and the information filled in by me in this form is accurate and true to the best of my knowledge. I Will responsible for any discrepancy, arising out of the form signed by me and I undertake that, in absence of any document the final admission will not be granted and/or admission will stand cancel.

I am aware of the Maharashtra Prohibition of Ragging Act, 1999 and I state that I will abide by all the rules and regulations of the Said Act.

Place _____

Date _____ Signature of the Student _____

9. Declaration by Guardian

I here Permitted my son/daughter/ward to Join your College. The Information Supplied by him/her is correct to the best of my Knowledge. I have acquainted myself with the rules and fees, dues to ny son/daughter/ward and to see that he/she observes.

Place _____


Date _____ Guardian Signature _____

10. For Office USE Only

Designation	Remarks/Particulars/Recommendation	Signature and date
Admission Clerk		
Admission Committee		
Accountant/Cashier	Cash Received:Rs.	Receipt No:
Registrar/Office Superintendent		
Principal/Director		

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2000 X		
500 X		
200 X		
100 X		
50 X		
20 X		
10 X		
5 X		
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	Karmaveer Tatyasaheb Hari Ravji Patil Kisan Shikshan Sanstha's Bhadgaon		College Code
	ARTS & SCIENCE COLLEGE, KOLGAON TAL. BHADGAON DIST. JALGAON		190130
For office Use only	Course Admitted to:	Division Roll No.	Form No.
	Admission date:		
Important Instructions to student: 1. Use black ink to fill in the form and Do NOT overwrite 2. Fill in all fields in CAPITAL letters only 3. Put (✓) Whenever applicable			Student should sign stricky inside this box only with black ink
Course Applied for (e.g.BA/BSc)			
Course for (e.g.F.Y.B.A./S.Y.B.A./T.Y.B.A.) (F.Y.B.Sc./S.Y.B.Sc./T.Y.B.Sc.)			
Applying for concession <input type="checkbox"/> EBC/ <input type="checkbox"/> SC/ <input type="checkbox"/> ST/ <input type="checkbox"/> NT/ <input type="checkbox"/> OBC/ <input type="checkbox"/> SBS <input type="checkbox"/> PTC/ <input type="checkbox"/> STC/ <input type="checkbox"/> Freedom fighter/ Ex Service Man			
1. Personal Information Section		Last Name (Sumame)	First Name
Name of Student (in case of changed name, write current Name)			Middie Name
Name of student:(In Devnagari Script) {dUmi` nMo Zncd (anR: U`d)			
Name of the student as printed on std. 10 th Manksheet (Write the name as it should appear on the marksheet)			
Father's/Husband's Name			
Mother's Name			
Previousname of the student: (in case of Changed name)			
Date of Birth:(DD)MM/YYYY):		Gender: <input type="checkbox"/> Male/ <input type="checkbox"/> Female	Marital Status <input type="checkbox"/> Married <input type="checkbox"/> Unmarried
Place of Birth:		Blood Group (With Rh):	
Religion:		Citizen of (country name):	
Address (House no/Street/area/suburb ets):			
State:		District:	Tehsil: City/Town/Village:
Address (HouseNo. /Street/area/suburb ets):		PIN Code:	
Permanent Address [Write only it different from 'Address for Corres Pondence']			
State:		District:	Tehsil: City/Town/Village:
Mobile +	91	Email iD:	
ABC ID		Aadhar Card No.	

2. Legal Reservation Information Section [Check (✓) Whichever is applicable]		
Domicile of State: <input type="checkbox"/> Maharashtra other State Specify:	Category: <input type="checkbox"/> Open <input type="checkbox"/> Reserved	if Reserved: Sc/ <input type="checkbox"/> ST/ <input type="checkbox"/> DA(A)/ <input type="checkbox"/> NT(B)/ <input type="checkbox"/> <input type="checkbox"/> NT(C)/ <input type="checkbox"/> NT(D)/ <input type="checkbox"/> OBC/ <input type="checkbox"/> SBC
Caste:	Sub-Caste:	If physically Challenged: <input type="checkbox"/> Visually Impaired <input type="checkbox"/> Speech and/or <input type="checkbox"/> Hearing Impaired/ <input type="checkbox"/> Orthopedic Disorder <input type="checkbox"/> or Mentally Retarded

3. Social Reservation in formation section [Check (✓) Whichever is applicable, write name of supporting document attached in section 6.]		
Ex-Serviceman/Ward of Ex-Serviceman		Member of project Affected family
Active-Serviceman/ward of Active-Serviceman		Member of Earthquake Affected family
Freedom fighter/ward of freedom fighter		Member of Flood/Famine Affected family
Ward of primary Teacher		Resident of Tribal Area
Ward of Secondary Teacher		Kashmir Migrant
Deserted/Divorced/widowed woman		

4. Selected/Opted Papers Sextion [Write paper codes or Paper Name only in the boxes](or attach list as per syllabus separately)					
Year/Samester I,II,III,IV,V,VI			Semester III,IV,V,VI, (If decided in first/Second semester only)		
	Code	Paper Name		Code	Paper Name
1.			1.		
2.			2.		
3.			3.		
4.			4.		
5.			5.		
6.			6.		
7.			7.		
8.			8.		
9.			9.		
10.			10.		
11.			11.		
12.			12.		
13.			13.		
14.			14.		
15.			15.		

5. Educational Details Section [Write 'YES' in last column, against the qualifying examination, on the basis of which You are seeking admission the said programme/Course: Write No. in front of other examinations]								
Last College Attended:				Year	Roll No/PRN:			
Name of Examination	Name/Board /University	Name of School/ College	Year & Month of Passing	Examination Seat No. (if Any)	Marksheet Statement No.	Grade /Total Marks Obtained	Out of	Qualifying Examination (YES/No)
Std 10 th Details are Mandatory								
Std 12 th								
F.Y								
SY								
TY								

5. Guardian Information Section	
Guardian's Name	
Occupation of the Guardian: <input type="checkbox"/> Service/ <input type="checkbox"/> Business/ <input type="checkbox"/> <input type="checkbox"/> Profession/ <input type="checkbox"/> Farmer/ <input type="checkbox"/> Laboure/ <input type="checkbox"/> Retired	Annual Income of the Guardian (Rs): Last Financial year
Relationship of guardian, with applicant:	Phone No:

6. Attached Documents and Certificates Section			
Sr. No	Name of Document/Certificate	Original/Attested True Copy	Attached (Yes/No)
1.	Mark Sheet of Std 10 th	Two Zerox Copy	
2.	Mark Sheet of Std 12 th	Two Zerox Copy & Original	
3.	Leaving Certificate	Original	
4.	Certificate of Caste with Category	Two Zerox Copy	
5.	Non Creamy Layer Certificate	Two Zerox Copy	
6.	Affidavit for changed name/Marriage Certificate/Govt.Gazette		
7.	Domicile Certificate	Two Zerox Copy	
8.	Certificate for Physically Challenged	Two Zerox Copy	
9.	Gap Certificate	Original Copy	
10.	Migration Certificate,	Original & two Attested True Copy	
11.	Aadhar Card	Xerox	
12.	ABC. ID	Print	

7. Other Information Section		
Mather Tongue	Employment Status: <input type="checkbox"/> Employed <input type="checkbox"/> Unemployed	Do You Wish to Join <input type="checkbox"/> NCC/ <input type="checkbox"/> NSS
Would you like to apply for Hostel:		
Hobbies, Proficiency and Other Interests: Games and Sports Participation Level: (e.g. College/State/National/International etc.):		
Personal Identification Marks:	1	2