

Form Fee: 50



Roll No/Admission No  
(For office Use)

### Application for Eligibility

(For Under Graduate Courses only)

I wish to apply for the Eligibility for the academic year 20\_\_ - 20 \_\_

1. Name of the Course to which application is sought

Year : 1<sup>st</sup> / 2<sup>nd</sup> / 3<sup>rd</sup> / 4<sup>th</sup> / 5<sup>th</sup>

2. Name in full of the Applicant (in English capital Letters)

Name as per last Mark sheet should be mentioned. N.R.I Student should write their name as it appears in their Passport.

3. Mother's Name

4. Aadhar No

5. Email Id

6. Mobile No

7. Nationality

8. Type: Maharashtrian / Non-Maharashtrian

9. Gender: Male / Female

10. Date of Birth: DD MM YYYY

11. Reserved Category \*

Do you belong to any of the following Reserved Categories?

If so attach a certificate of a Competent Authority in support of it

(Tick mark V in applicable box )

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Open	SC	ST	DT(A)	NT(B)	NT(C)	NT(D)	OBC	SBC	

Do you belong to the creamy layer of NT(C), NT (D) and OBC? Yes / No

If you do not belong to the creamy layer, submit a certificate of a Competent Authority in support of it.

12. Are you a physically handicap? No / Yes ( If Yes specify type \_\_\_\_\_ ) #

#### Particulars of the H.S.C. Examination

1. Have you passed Exam from Maharashtra board? Yes / No

if No please specify Name of Board \_\_\_\_\_

2. Name of the school/Jr. College/College

\_\_\_\_\_

Seat No.	Month & Year Of Passing	Percentage	Class/Grade

#### Please specify Educational gap details if any

Last Examination name	Seat No.	Month & Year Of Passing	Percentage	Class/Grade

13. Are you belong to the Minority? No/Yes ( if yes please specify type which has given below)

Linguistic:  Religious:

Signature of Candidate

Copies of Following attested certificates are annexed to application form

- Statement of Marks of the qualifying examination
- Education Gap certificate
- Affidavit for change in name
- Domicile Certificate
- Cast certificate (For reserved category candidates)
- Cast validity certificate (For reserved category candidates)

To be filled by College/Institute / University Department

Receipt No.

Date:

Eligible / Not Eligible

Asst.

Sr. Asst.

O.S./Registrar /HOD