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|  | Shriram Shikshan Sanstha's, Ramtek TAI GOLWALKAR MAHAVIDYALAYA, RAMTEK Science & Home Science | | | | College Code : 373 College Id : | | <div>Please Paste a Passport size (35 mm x 45 mm) Photograph here, Do not Staple Photo should not Exceed the borders.</div> | | |
| APPLICATION FOR ADMISSION 20__ - 20__ | | | | | | | | | |
| For College Use only | Course Admitted to : B. Sc. | | | | Form No. : | | | | |
| | Admission Date : / / | | | | | | | | |
| Kindly read important notes before filling-in form; 1. Use blank ink to fill in the form and Do NOT overwrite. 2. Fill in all fields in CAPITAL Letters only. 3. Strike off whichever is NOT applicable. E.g. If you are a Male :- Gender, Male / Female | | | | | | | | | |
| Course applied for (B.Sc - I, II III) | | | | | Student should sign strictly inside this box only with black ink | | Student Signature | | |
| Course Part applied for (e.g. Part 1 / 2 / 3 / 4) | | | | | | | | | |
| Applying for Concession EBC / BC / PTC / STC / Freedom Fighter/ Military : | | | | | | | | | |
| 1. Personal Information Section | | | | | | | | | |
| | | | First Name | | Middle Name | | Last Name | | |
| Name of the Student : (In case of changed name, write current name) | | | | | | | | | |
| Name of the Student : (In Devnagari/ Marathi Script) | | | | | | | | | |
| Name of the Student as printed on Std. 10 Passing Certificate | | | | | | | | | |
| Father's / Husband's Name : | | | | | | | | | |
| Mother's Name : | | | | | | | | | |
| Previous name of the Student : (In case of changed name) | | | | | | | | | |
| Reason for name change : Willingly / After Marriage | | | | Marital Status : Unmarried / Married | | | | | |
| Date of Birth (DD / MM / YYYY) : / / | | | | Gender : Male / Female | | | | | |
| Place of Birth : | | | | Blood Group (with Rh) : | | | | | |
| Religion : | | | | Citizen of (country name) : INDIA | | | | | |
| Address for correspondence | | | | | | | | | |
| * Student ID No. | | <div></div> | | | | | | | |
| * Aadhar Card No. | | <div></div> | | | | | | | |
| State : MAHARASTRA | | District : | | Tahsil : | | City/Town/Village : | | | |
| Address (House no. street / area etc.) | | | | PIN Code : | | <div></div> | | | |
| Permanent Address (Write only if different than Address for correspondence) | | | | | | | | | |
| State : MAHARASTRA | | District : | | Tehsil : | | City / Town / Village : | | | |
| *Mobile number : | | <div></div> | | *Email ID : | | <div></div> | | | |
| 2. Legal Reservation Information Section | | | | | | | | | |
| Domicile of State : | | *Category : Open / Reserved | | *If Reserved : SC / ST / DT(A) / NT (B) / NT (C) / NT (D) / OBC / SBC | | | | | |
| *Caste/Sub-Caste | | *If Physically Challenged : Visually Impaired / Speech and / or Hearing Impaired / Orthopedic Disorder of Mentally Retarded | | | | | | | |
| 3. Social Reservation Information Section [Check () whichever is applicable, write name of supporting document attached, in section 6.] | | | | | | | | | |
| <input type="checkbox"/> | Ex-Serviceman / Ward of Ex-Serviceman | | | <input type="checkbox"/> | Member of Project Affected Family | | | | |
| <input type="checkbox"/> | Active-Serviceman / Ward of Active-Serviceman | | | <input type="checkbox"/> | Member of Earthquake Affected Family | | | | |
| <input type="checkbox"/> | Freedom Fighter / Ward of Freedom Fighter | | | <input type="checkbox"/> | Member of Flood / Famine Affected Family | | | | |
| <input type="checkbox"/> | Ward of Primary Teacher | | | <input type="checkbox"/> | Resident of Tribal Area | | | | |
| <input type="checkbox"/> | Ward of Secondary Teacher | | | <input type="checkbox"/> | Kashmir Migrant | | | | |
| <input type="checkbox"/> | Deserted / Divorced / Widowed Women | | | <input type="checkbox"/> | | | | | |
| 4. Educational Details Section [Write 'YES' in last column, against the qualifying examination, on basis of which you are seeking admission to the said course write NO in front of other examinations] | | | | | | | | | |
| Name of Examination | Name of Board / University | Name of School / College/ Enrolment No. | | Date of Passing (DD/MM/YYYY) | Examination- on- on Seat No. (Last) | Degree/ Passing Certificate No. | Grade / Total Marks Obtained | Out of | Qualifying Examination ? (YES/No) |
| *Std 10 th | Nagpur | | | | | | | | |
| *Std 12 th | | | | | | | | | |
| B. Sc. I Year | | | | | | | | | |
| B. Sc. II Year | | | | | | | | | |
| B. Sc. III Year | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| Please Turn Over : | | | | | | | | | |
| Form No. | | | | | | | | | |
| 5. Selected / Opted Papers Section (Write paper codes only, in the boxes) | | | | | | | | | |

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|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| 1. ENGLISH | 2. MARATHI | 3. | 4. | 5. | | | | | | | | | | |
| 6. | 7. | 8. | 9 | 10. | | | | | | | | | | |
| 6. Attached Documents and Certificates Section | | | | | | | | | | | | | | |
| Sr. No. | Name of Document / Certificate | Original / Attested True Copy | Attached (Yes / No.) | | | | | | | | | | | |
| 1 | Passing Certificate of Std 10 th | Attested True Copy | | | | | | | | | | | | |
| 2 | Passing Certificate of Std 12 th / Statement of Marks of Std 12 th | Attested True Copy | | | | | | | | | | | | |
| 3 | Leaving Certificate | Original | | | | | | | | | | | | |
| 4 | Certificate of Caste with Category | Attested True Copy | | | | | | | | | | | | |
| 5 | Non Creamy Layer Certificate | Attested True Copy | | | | | | | | | | | | |
| 6 | Affidavit for changed name / Marriage Certificate / Govt. Gazette | | | | | | | | | | | | | |
| 7 | Domicile Certificate | Attested True Copy | | | | | | | | | | | | |
| 8 | Certificate for Physically Challenged | Attested True Copy | | | | | | | | | | | | |
| 9 | | | | | | | | | | | | | | |
| 10 | | | | | | | | | | | | | | |
| 7. Guardian Information Section | | | | | | | | | | | | | | |
| Guardian's Name : | | | | | | | | | | | | | | |
| Guardian's Mobile No. <table><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| Occupation of the Guardian : Service / Business / Profession / Farmer / Laborer/Retired | | | Annual Income of the Guardian (Rs.) : (Last financial year) | | | | | | | | | | | |
| Relationship of guardian with applicant : | | | Phone No. <table><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| 8. Other Information Section | | | | | | | | | | | | | | |
| Mother Tongue : | | Employment Status : Employed / Unemployed | | Do you wish to join NCC/NSS : Yes / No | | | | | | | | | | |
| Would you like to apply for hostel : Yes / No. | | | | | | | | | | | | | | |
| Hobbies, Proficiency and Other Interests : | | | | | | | | | | | | | | |
| Games and Sports Participation : Level (e.g. College / State / National / International etc.) | | | | | | | | | | | | | | |
| Personal Identification Marks : | | 1. | | 2. | | | | | | | | | | |
| 9. 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 be responsible for any discrepancy, arising out of the form signed by me and undertake that, in absence of any document the final admission will not be granted and / or admission will stand cancel. | | | | | | | | | | | | | | |
| Place : Date : | | Signature of the student : _____ | | | | | | | | | | | | |
| 10. Declaration by Parents / Guardian | | | | | | | | | | | | | | |
| I have 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 my son / daughter / ward and to see that he / she observes. | | | | | | | | | | | | | | |
| Place : Date : | | Signature of the Parents / Guardian: _____ | | | | | | | | | | | | |
| 11. For College / Institute Use only | | | | | | | | | | | | | | |
| Designation | Remarks / Particulars / Recommendations | | Signature and date | | | | | | | | | | | |
| Admission Clerk | | | | | | | | | | | | | | |
| Admission Committee | | | | | | | | | | | | | | |
| Accountant / Cashier | Cash Received: Rs. Receipt No. | | | | | | | | | | | | | |
| Registrar / Office Superintendent | | | | | | | | | | | | | | |
| Principal / Director | | | | | | | | | | | | | | |
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