Application for Admission to College Code: The S. N. D. T. Women's University's Smt. Ratnaprabhadevi Mohite-Patil College of Home Science for Women, Akluj Tal: Malshiras Dist: Solapur For College use Course Admitted to: Division: Form No: Roll No: only Admission date: Kindly read important notes before filling-in form: 1. Use black ink to fill in the form and Do Not overwrite. 2. Fill in all fields in CAPITAL letters only. 3. Strike-off whichever in NOT applicable. Course applied for: Student should sign strictly inside this box only Course Part or Semester applied for (e.g.1/2/3/4): with black ink Applying for Concession EBC/SC/ST/NT/OBC/SBC/PTC/STC/Ward of Freedom Fighter/Ward of Ex Service Man: Admitted against which Category: Open/Reserved If Reserved, Specify: 1. Personal Information Section: Last Name First Name Middle Name Name of the Student: (in case of changed name, write current name) Name of the Student: (in Devanagari) Name of the Student as printed on Std. X 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 / Divorced / Widowed Previous SNDT WU Enrolment Number: Date of Birth (DD/MM/YYYY): Place of Birth: Blood Group (with Rh): Religion: Citizen of (country name): Student's Location Category: Rural / Urban / Tribal Address for Correspondence: State: District: Tehsil: City/Town/Village: Address PIN Code: (House no, Street/area/suburb etc.) Permanent Address [Write only if different than 'Address for Correspondence'] State: District: Tehsil: City/Town/Village: Address PIN Code: (House no, Street/area/suburb etc.) Contact Details Phone # 1: STD Code: Phone# 2: STD Code: Phone No: Phone No: Mobile Number: Email ID: 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 Sub-Caste: Caste: If Physical Challenged: Visually Impaired/Speech and / or Hearing Impaired / Orthopedically Impaired/Learning Disabled Social Reservation Information Section (Check () whichever is applicable, write name of supporting document attached, in section 7. 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 School Teacher Resident of Tribal Area

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Kashmir Migrant

Ward of Secondary School Teacher

Deserted/Divorced/Widowed Women

Form I	No:						
4. Gua	rdian Information Sec	tion			A CONTRACTOR OF THE PARTY OF TH		
Occupa	ation of the Guardian; Se	ervice/Business/Profession	on/Farmer/Laborer/I		ncome of the Guar	dian (Rs.)	
Relatio	onship of guardian wi	th applicant:		Phone	No:		
5. Edu	cational Details Section	on					
and the second second	Qualifying Exam Detail of Last Qualifying Exa	ls: (In case of Degree n	nention major & su	bsidiary subjects	5)		0 61
-	of Board/University &	25.23 A N	Date of Passing	Examination	Degree/Passing	Grade/Total	
	School/College	Subjects Studied	(DD/MM/YYYY)		Certificate No.	Marks Obtained	Out of
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	e attach separate sneet ched Documents and	giving subjects opted f Certificates Section	or.	77			
Sr. No.	A STATE OF THE PARTY OF THE PAR	Testing in the party and an experience of the		Original/Attested	True Copy	Attached (Y	es/No)
1	Passing Certificate of Std. X			Attested True Copy (Mandatory)		7.11.01.00 (1)	23,1107
2	Passing Certificate of last qualifying examination			Attested True Copy			-
3	Leaving Certificate			Original			
4	Certificate of Caste with Category (if applicable)			Attested True Copy			
5	Non Creamy Layer Certificate (if applicable)			Attested True Copy			
6	Affidavit for changed name/Marriage Certificate/Govt.			Attested True Copy		Maria des	
UCSST.	Gazette (if applicable)						
7	* Domicile Certificate (if applicable)			Attested True Copy		-	-
8	Certificate for Physically Challenged (if applicable)			Attested True Copy			
9 Certificate for Social Reservation (if applicable)				Attested True Copy			
8. Oth	er Information Section						
Mother	Tongue:	Employment State	us: Employed/Une	mployed	Do you w	ish to join NCC/NS	SS:Yes/N
Would	you like to apply for						
Water land	es, Proficiency and O						
	s and Sports participa						
	e.g. college/State/Natio			110000	S - FS		
Personal Identification Marks: 1.				2.			
	laration by Student:						-150
the be	est of my knowledge. I	read the rules related to will be responsible for	any discrepancy	e information fille arising out of the	ed in by me in this e form signed by	form is accurate a me and I undertal	ind true to ke that, in
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200000		, , , , , , , , , , , , , , , , , , , ,	i will abide by all	the rules and r	egulations of the	salu Act.	
-	Place: Date: Signature of the Students of the						
	claration by Guardian permitted my daughter	/son/ward to join your co	ollege. The informa	tion supplied by I	her/him is correct	to the hest of my kr	oowledge
I have	acquainted myself with	the fees, dues and rul	es applicable to m	y daughter/son/v	vard and to see th	at she/he observe	s them.
Place	#c	Data		Ciana			
	r College/Institute Use	Date:		Signa	ture of the Guar	dian:	
Design	ation	Remarks / Partic	ulars / Recommen	dations		Signature a	nd date
Admis	sion Clerk		and nativesing as not probably that ye			- J. Marier W	
E THE PARTY	sion Committee				8500		
			-	W. V. II. P.M.	505 BB 1 11		
Accountant / Cashier		Cash Received:	Rs.	Receipt No.	12		
Regist	tar / Office Supdt.				*		
Princi	pal / Director			#1			
Mate	Or destabling	photocopy of completel	F. C.				