

Roll No/Admission No.

Form fees:Rs.50/-			Eligibility es//M.Phil./Ph.D.)		(for office use only)
I wish to apply for the Elig 1. Name of the Course to	-				$nr: 1^{st} / 2^{nd} / 3^{rd} / 4^{th} / 5^{th}$
2. Name of the Applicant Name as per last Mark sl their Passport.			R.I. Student should		
3. Mother's Name:		4. A	adhar No.:		
5. Mobile No.:			AN No.:		
7. Email Id:			ype: Maharashtri		
9. Nationality:		10. F	Religion:		
11. Gender: Male/Female	e/Transgender	<b>12.</b> ]	Date of Birth:		
<ul> <li>13. Category (Tick mark Open SC ST (If you belong to any of the 1) Do you belong to DT(A (If yes submit the Non-Creation 14. Are you Physically Distribution 15. Particulars of the Q 1.Name of the Course: 3.Name of the University: 4.Name of the College/Institution</li> </ul>	DT(A) NT(B) Reserve category at: A), NT(B), NT(C), N eamy layer certificate of isabled? Yes/ No ( Qualifying Examinat	tach a cer T(D), O f a Compe If yes ple	rtificate of a Comp BC, SBC, SEBC o tent Authority in sup ase specify type :	etent Author o <b>r EWS?</b> Ye port of it.).	es / No
Seat No.	Month & Year of P		Percentag	e	Class/Grade
5. Please specify Education Last Examination Name			& Year of Passing	Percenta	ge Class/Grade
16. Are you belong to the	Minority? Yes / N Linguist		please specify type Religion:	e which has	given below)

- 1. Statement of Marks of the qualifying examination
- 2. Educational Gap Certificate
- 3. Affidavit for change in name
- 4. Domicile Certificate

- 5. Caste Certificate (For reserved category students)
- 6. Caste Validity Certificate (For reserved category students)
- 7. Transfer Certificate
- 8. Migration Certificate (If applicable)

### To be filled by College / Institute / University Department

Receipt No.	Date:	Eligible / Not Eligible
Asst.	Sr.Asst.	O.S./ Registrar / HOD

### \*Physical Disabled Types:

P1	Blind / Visually impaired/ va/k@nzg"Vhghu
P2	Dumb and Deaf / eqdcf/kj
P3	Orthopedically impaired/ vfLFkO;ax
P4	Mentally Challenged/ efrean@xrhean
	oxSjs
OT	Other Physical disabilities

## **ANNEXURE 'A' ELIGIBILITY FEE**

1. Student passing qualifying examination and seeking admission First Time to First Year of any Degree/Diploma/Certificate (U.G./P.G.) the Eligibility Fee will be as under:

Sr. No.	Particulars	Fees		
		Non- Professional	Professional	
1. 2. 3.	Within the State of Maharashtra From outside the State of Maharashtra From any foreign country (Out of India) and (NRI/Foreign Citizen-Foreign National, P.I.O.)	Rs. 300 500 500	Rs. 500 1000 1000	
4. 5.	Eligibility Form Fee Equivalence Fee (Per Candidate)	50 500	50 500	

- 2. Admission charges for the submission of required documents will be Rs. 300 for Non-Professional courses & Rs. 500/- for Professional courses (Per Student) up to 30 day's from last date prescribed for submission of documents.
- 3. If an affiliated College admits students not eligible and who are migrating from other University/Board and allowing to fill in Examination Form without obtaining Eligibility Certificate, a penalty of Rs.10,000/-per student would be imposed on the College and the performance of Examination of such students will also be cancelled.
- 4. If any affiliated College admits any student not eligible for Under-graduate or Post-Graduate Courses of this University and allows him/her to fill in the Examination Form, a penalty of Rs.5,000/- per student shall be imposed on the College and performance of the examination of such student shall be cancelled.
- 5. The same rule applies to the University Department, Centres/Schools. The Head of University

department/Director of Recognise Institute will have to pay penalty as above in case not

# SAVITRIBAI PHULE PUNE UNIVERSITY



Roll No/Admission No. (for office use only)

	``			Courses						
wish to apply for the Eligib	ility for the	e acaden	nic year :	20_	20					
Name of the Course to w	hich Adm	ission is	sought:				Ŷ	/ear: 1 <sup>st</sup>	$/2^{\rm nd}/3^{\rm rd}/4^{\rm t}$	<sup>h</sup> / 5 <sup>t</sup>
• Name of the Applicant ( <i>i</i> Name as per last Mark she their Passport.				R.I. Stude	ent shoul	ld write				
Mother's Name:		_	<b>4.</b> A	adhar N	lo.:					
Mobile No.:			6. P	AN No.:						
Email Id:			8. [	Гуре: М	laharasht	trian /	Non	-Mahara	shtrian	
Nationality:			<b>10.</b> ]	Religion:					_	
I. Gender: Male/Female/	Transgend	er	12.	Date of ]	Birth:					
<b>3. Category</b> (Tick mark √ in	n applicabl	le box)			D	D	MM	YYYY	Ŷ	
1	DT(A)	. ,	. ,					SEBC	EWS	]
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f you belong to any of the F Do you belong to DT(A) (If yes submit the Non-Crea	Reserve cat , NT(B), N my layer ce	regory at NT(C), N rtificate c	ttach a ce NT(D), O of a Comp	ertificate D <b>BC, SBC</b> etent Auth	of a Com C <b>, SEBC</b> pority in su	npetent Cor EV upport o	t Auth <b>VS?</b> of it.).	ority in S Yes / N	Support of it.	)
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16. Are you belong to the Minority? Yes / No (if yes please specify type which has given below)

Linguistic: Religion:

# Copies of following attested certificates are annexed to application form1. Statement of Marks of the qualifying<br/>examination5. Caste Certificate ( For reserved category students)<br/>6. Caste Validity Certificate ( For reserved category<br/>students)2. Educational Gap Certificate<br/>3. Affidavit for change in name7. Transfer Certificate

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department/Director of Recognise Institute will have to pay penalty as above in case not eligible candidate is allowed to fill in the University Examination form.