

Registered No.....

Receipt No

Signature

Run by D.K. Health & Welfare Society, Chichgarh

S. Chandra Mahila Mahavidyalaya

Sakoli Dist. Bhandara

(Arts & B.Sc. Home Science Faculty)

Admission Form:-

(Application for admission to college for the Session 20.....20.....)

(To be filled by the candidate in his own handwriting no Column should be left blank)

For College use only	Course Admitted to :-	Form No.	Current Passport
	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 field in capital letters only			
3) Strike-off whichever is NOT applicable. E.g. if you are a male Gender : Male			
Course applied for (e.g. B.A. / B.Sc. Home Science)		Student Should Sign. Strictly inside this box only with Black Ink	
Course Part or Semester Applied (e.g. 1/2/3/4/5/6)			

Applying for Concession EBC/BC/PTC/STC/ Freedom Fighter :

Admitted against Category : Open / Reserved If Reserved, Specify

1) Personal Information Section

Name of Student (In case of changed name, write current name)	Last Name	First Name	Middle Name
Name of Student (मराठी मध्ये)			
Name of Student as printed on Std.10 th Passing Certificate			
Father/ Husband's Name			
Mother Name			
Previous Name of the Student (In Case of the changed name)			
Reason For Name Change :- Willingly/ After Marriage	Marital Status : Unmarried/ Married/Divorced/ Widowed/Deserted		
Date of Birth :- (DD/MM/YYYY)	Gender :-		
Place of Birth :-	Blood Group:-		
Religion :-	Citizen of :-		

Student Location Category : Rural / Urban / Tribal

Address For Correspondence :-

State :-	District :-	Taluka:-	City/Town/Village:-
Address: (House no. Street/area/suburb etc.)			Pin Code

Permanent Address (Write only if different than Address for Correspondence)

State :-	District :-	Taluka:-	City/Town/Village:-
Address: (House no. Street/area/suburb etc.)			Pin Code

Contact Details :-	Mob. No.	Email ID:-
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2) Legal Reservation Information Section

Domicile of the State :	Category : Open/ Reserved	If Reserved :- ST/SC/DT(A)/NT(B)/NT(C)/NT(D)/OBC/SBC
Cast :-	Sub-Cast :-	If Physically Challenged:- visually impaired/ Speech and/ or Hearing impaired/ Orthopedic Disorder or mentally Retarded.

3) Selected / Opted Paper Section : (Write Paper Codes or Paper Name only, in the boxes)

1.	2.	3.	4.	5.
6.	7.	8.	9.	10.

4) Education 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 examination) Please Note:- 10th Details are mandatory in any case.

Last College Attended								
Name of Examination	Name of Board / University	Name of School/ College	Date of Passing (DD/MM/YYYY)	Examination Seat No. (Last)	Degree/Passing Certificate no.	Grade / Total Marks Obtained	Out Of	Qualifying Examination
Std. 10 th								
Std. 12 th								

5) Guardian Information Section :-

Guardian Name :-	
Occupation of the Guardian: Service / Business / Profession / Farmer/ Laborer / Retired.	Annual Income of The Guardian Rs.:- (Last Financial Year)
Relationship of guardian with applicant:	Mobile No.

6) Attached Document and Certificate Section:-

1)	Passing Certificate of std. 10 th	4) Aadhar Card	7)
2)	Passing Certificate of std. 12 th	5)	8)
3)	Leaving Certificate	6)	9)

7) 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 :		
Game and Sports Participation: Level (e.g. College/state/National/International etc.)		
Personal Identification Mark :	1)	2)

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 the best of my knowledge. I will be 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 an / or admission will stand cancel.

I am aware of the Mah. Prohibition of Ragging Act. 1999 and I state that I will abide by all the rules and regulation of the said act.

Place : _____

Date : _____ **Signature of the Student**

9) Declaration by 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 Guardian**

9) For College / Institute Use only :

Designation	Remarks / Particulars / Recommendations	Signature and Date
Admission Clerk		
Accountant / Cashier	Cash Received	Receipt no.
Registrar		
Principal		