



**SWAMI RAMANAND TEERTH MARATHWADA UNIVESRSITY,**  
"DNYANTEERTH", VISHNUPURI, NANDED

(UGC 2(f), 12(B) Recognised and NAAC Re-accredited 'B' Grade State University)

REGISTRATION FORM FOR  
ADMISSION TO CAMPUS SCHOOLS AND SUB CENTRE 2011-2012

INSTRUCTIONS:

- 1) Last date for submitting the application in the University Office \_\_\_\_\_  
2) Candidate should submit the application to the concerned School \_\_\_\_\_

1) The course to which admission is sought.

1) School : \_\_\_\_\_

2) Course preference (a) \_\_\_\_\_ (b) \_\_\_\_\_ (c) \_\_\_\_\_  
(d) \_\_\_\_\_ (e) \_\_\_\_\_ (f) \_\_\_\_\_

2) Name of the Applicant: \_\_\_\_\_  
(Surname) (Name)

a) Father's Name: \_\_\_\_\_

b) Mother's Name: \_\_\_\_\_  
(In capital letters)

3) Age and Date of Birth: Years \_\_\_\_\_ Day \_\_\_\_\_ Month \_\_\_\_\_ Year \_\_\_\_\_

4) Permanent Address: \_\_\_\_\_  
\_\_\_\_\_

Address for Correspondence: \_\_\_\_\_  
\_\_\_\_\_

5) Gender a) Male b) Female

6) Do you belong to any of the backward classes ? If so put (✓) mark against the category you belong to.

(a) Scheduled Caste, (b) Scheduled Tribe, (c) Vimukta Jati, (d) Nomadic Tribe-I,  
(e) Nomadic Tribe-II, (f) Nomadic Tribe-III, (g) O.B.C., (h) S.B.C. (i) Open

7) Physically Handicapped : (a) Yes (b) No.

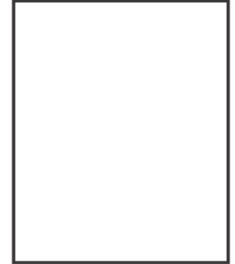
Minimum 40%

8) Ward/Spouse of Active/ (a) Yes (b) No.

Ex. Serviceman

9) Qualifying Examination Passed:

(a) B.A. (b) B.Com. (c) B.Sc. (d) Any other Degree



10) Details of Institution attended for graduation

University : \_\_\_\_\_

College : \_\_\_\_\_

Place : \_\_\_\_\_

11) Details of Marks Obtained at Qualifying Examination:

Sr. No.	Year	Year of Passing	Marks obtained in the optional subject in which the candidate is registering his name	Total	Maximum	Total
1.	I yr					
2.	II yr					
3	III yr					
			Grand Total I, II & III			

Note: (Attach true copies of Marks Memo of all the three years, T.C. and other certificates in support of Sr. No. 6 to 11).

I hereby declare that, all the statements made in the application form are true and correct. I understand that, if any information is found incorrect, my admission will be liable to be cancelled at any stage.

In case, I am finally admitted to the said course, I undertake the responsibility of submitting all the required documents in original, along with testimonials thereof at the time of admission together with a crossed D.D. towards payment of the prescribed fee.

Date:

Place:

(Signature of the Applicant)

FOR OFFICE USE ONLY	
Inward Date :	
Receipt No. :	Amount:

Over and Above quota

Type of Admission: 70% 30% 20% other State As per University rules

Category:

Percentage: Physically handicap (Min. 40%) Yes/No

Ex/Active serviceman: Yes/No.

Date:

(Name & Signature)  
Checked

(Name & Signature)  
Rechecked

(Name & Signature)  
HOD

(Name & Signature)  
Not Admitted

Eligibility Section

Note : Kindly add Rs. 100/- alongwith 'Registration Fee' if you are submitting downloaded form.