



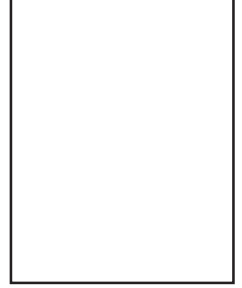
SWAMI RAMANAND TEERTH MARATHWADA UNIVESRSITY,
"DNYANTEERTH", VISHNUPURI, NANDED

(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/
Ex. Serviceman (a) Yes (b) No.

- 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.