	SD New Satara Samuh Mumbai's New Satara College of B.C.A, Pandharpur							College Code:							
The Print of the P	(Affiliated To Solapur University, Solapur & Approved by Govt. of Maharas														
For College		New Solapur Road, Opp. Reliance Petrol Pump, Pandharpur Ph. No. (02186) 2222 Course Admitted to: Roll No.:							Form No:						
Use Only →		Admission date: / /						- Form N	1 2 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				Please paste a		
	Se Only → Admission date: Kindly read important notes before filling-in form:							 	Pas				ort size (35		
1. Use black ink to fill in the form and Do NOT overwrite.												nm) Photog			
2. Fill in all fields in CAPITAL letters only. 2. Strike off which you is NOT applicable. For If you are a Male 1. Conday Male/Ferrale.												Do NOT sta to should n	-		
	3. Strike-off whichever is NOT applicable. <i>E.g. If you are a Male :-></i> Gender: Male/Female Course Applied For:							↑ Studen	↑ Student should sign strictly				d the borde		
							·			his box only with black					
Course Part applied for (e.g. Part 1/2/3):				:/SBC/PTC/STC/Freedom Fighter/Ex			Ink Ex Service M	Ian•							
1. Personal Info			111 / ODC		10/110	cuom 1 ig	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	BA BEI VICE IV							
1. Fersonai inio	mation Sect	1011		Last Name			First Name				Middle Name				
Name of the Stu	ıdent:			Lust Name				1 trst reame							
(In case of chang															
Name of the Stu	ident: (In Dev	nagari script)													
Name of the Stu std. 10 Passing	-	ed on													
Father's/Husba															
Mother's Name	·:						十								
Previous name	of the Studen	t:					+								
(In case of chang															
Reason for nam	ne change: Wi	llingly / After	· Marriage	:	Marital	Status:	Unmarr	ried / Married							
Last College At								<u> </u>			Roll No	l No. :			
Date of Birth (D	DD/MM/YYYY)	: /	1					nder: Male /	Female						
Place of Birth:							Blood Group (with Rh):								
Religion:						Citizen	of (cou	intry name):							
Address for Co	rrespondence														
State:	State: District:				Tehsil:				City/Town/Village:						
Address (House	no, street/area	etc.):		·				PIN Code:							
Permanent Add	lress [Write or	nly if differen	t than 'Ad	dress for Corres	pondence	·']		_							
State:		District:			Tehs	il:			City/T	own/Villaş	-				
Address (House		a etc.):								PIN Code	:				
Contact Details			Phone I	No:		Dho	ne # 2:	Area/ST	D Codo		Dho	ne No:			
Phone # 1: Mobile number	Area/STD C	ode:	Phone	NO.			ail ID:	Area/S1	D Code	•	Piloi	ie ivo:			
		Atom C. At				Em	I <i>D</i> .								
2. Legal Reserv Domicile of Star			Catago	y: Open / Reserv	red.	If D.	acorrod	: SC / ST / D	T(A) / N	T(R) / NT/	C) / NT	(D) / (OP/	7/SBC		
Caste:	ic.	Sub-Ca		y. Open/ Keserv				ed: Visually						/	
					Orthop	edic Disc	order or	Mentally Re	tarded					•	
3. Social Reserv				√) whichever is a	applicable	e, write n					n section	n 7.]			
Ex-Serviceman/Ward of Ex-Serviceman					+	Member of Project Affected Family				N/					
Active-Serviceman/Ward of Active-Serviceman Freedom Fighter/Ward of Freedom Fighter						+	Member of Earthquake Affected Family Member of Flood / Famine Affected Family				•				
Ward of Primary Teacher							Resident of Tribal Area								
Ward of Secondary Teacher							Kashmir Migrant								
4. Selected/Opto	ivorced/Widov		aner code	or napar nama	in the be	vecl									
1.	cu rapers sec	2.	aper codes	s or paper name,	m me oo	ACSI		4.			5.				
6.				8.		9.					10.				
												15.			
11.				13.	13.			14.	14.			5.			
5. Guardian Inf		tion													
Guardian's Nai	me:														
Occupation of the Guardian: Service / Business / Profession / Farmer / Labour / Retired							Annual Income of the Guardian (Rs.): (Last Financial Year)								
Occupation of t	he Guardian:	Service / Bu	siness / Pr	ofession / Farme	er / Labou	ır / Retire	ed				uardiar	ı (Rs.):			

P.T.O...

		-	ES' in last column, against the qua	lifying examinat	ion, on basis of	which you are s	eeking admis	sion to the	said		
Name of Examinati		Board	Name of School/College	Date of Passing (DD/MM/Y YYY)	Examination Seat No. (Last)	Degree / Passing Certificate No.	Grade / Total Marks Obtained	Out of	Qualifying Examinat ion? (YES/NO)		
Std 10 th											
Std 12 th											
7. Attache Sr. No.	ed Documents and C Name of Document		ection		Original /	Attacted True	Conv	Attacha	d (Yes/No)		
1	Passing Certificate of					Original / Attested True Copy Attached (Y Attested True Copy					
2	Passing Certificate of	of Std 12°/ St	atement of Marks of Std 12 th		Attested Ti	Attested True Copy					
3	Leaving Certificate				Original						
		31. Cara									
4	Certificate of Caste		у 		Attested Ti						
5	Non Creamy Layer	Certificate			Attested Ti	ue Copy					
6	Affidavit for change	d name/ Mai	riage Certificate / Govt. Gazette								
7	Domicile Certificate	:			Attested Ti	ue Copy					
8	Certificate for Physi	cally Challer	nged		Attested Tr	rue Copy					
9											
10											
11											
12											
	Information Section				1						
Mother To			Employment Status: En	nployed / Unemp	oloyed	Do you wish to	join NCC / N	ISS : Yes	/ No		
	u like to apply for Ho Proficiency and Other)								
	d Sports participation:										
1	. college/state/nationa		al etc.):								
Personal Id	dentification Marks:	1.			2.						
	ntion by Student	•									
			elated to admission and the information of the form serepancy, arising out of the form s								
	will not be granted a	•	1 7	ighed by the and	i unucrtake ma	i, ili abselice of	any documen	i uie iiiai			
	re of the Maharashtı	a Prohibitio	on of Ragging Act, 1999 and I sta	ate that I will al	oide by all the r	ules and regula	ations of the	said Act.			
Place: Date:				a.	A.J. G. J						
	Signature of the Student: 10. Declaration by Guardian										
	•	er/ward to jo	in your college. The information s	supplied by him/	her is correct to	the best of my k	nowledge. I l	nave			
acquainted			ues to my son/daughter/ward and t			•					
Place: Date:											
	ollege/Institute Use () mlv		Signature of	f the Guardian	:					
Designation		Ī	Signature a	nd date							
Admission											
	n Committee										
Accountai	ccountant/Cashier Cash Received: Rs. Receipt No.:										
Registrar	/Office										
Superintendent											
Principal/	Director										