	AXMIBAI		KH MAH	ILA N	IAHA	VID	Mandal's YALAYA PARLI-V. y Aurangabad.	College Code:							
For college							Form No:		Dless			cnort			
use only →	Kon No.									Please paste a passport size (35 mm X 45 mm)					
Kindly read imp	Admission da		/								here, D				
Kindly read important notes before filling-in form: 1. Use black ink to fill in the form and Do NOT overwrite. 2. Fill in all fields in CAPITAL letters only. 3. Strike-off whichever is NOT applicable. E.g. If you are a Male:-> Gender: Male / Female							2	staple. <u>Photo should not</u> <u>exceed the borders</u> .							
	Course app	plied for (e.g.BA/	BCom/BE):												
Course Part or Semester applied for (e.g. 1/2/3/4):							† Student should sign st box only with black ink	1-							
			BC / SBC / P	rc/src/	Freedom	Fighte	er / Ex Service Man :								
1. Personal	Information	Section													
Name of the S	tudont:			Last Na	me		First Name		Mi	iddle Na	ime				
	ged name, write c	urrent name)					*								
Name of the S	student: (In Devn	nagari script)													
Name of the S std. 10 Passin	itudent as print g Certificate	ed on						-							
Father's/Hush	and's Name:						2								
Mother's Nan	ne:														
(In case of change								1/100							
	me change: Wil	lingly / After Mar / /	riage		Marital S	status:	Unmarried / Married/Divorce Gender: Male / Female	d/ Widowed/Des	serted						
Place of Birth						Blood Group (with Rh):									
Religion:						Citizen of (country name):									
	orrespondence														
State:		Dist	rict:				Tehsil:	City	/Town/Villa	ge:					
Address (Hous	se no, street/are	ea/suburb etc.)						PIN Code	e:	_	Т				
Permanent Ad	Idress [Write or	nly if different tha	n 'Address fo	r Correspo	ondence']									
State:		Dist	rict:				Tehsil:	City	/Town/Villa	ge:					
Address (Hous	se no, street/are	ea/suburb etc.)						PIN Code	2:	T	1				
Contact Detail	s						T V								
Phone # 1:	STD Code:	P	hone No:			F	Phone # 2: STD Code:	Ph	one No:						
Mobile number	er:			Er	mail ID:										
2. Legal Res	ervation Inf	ormation Sect	ion												
Domicile of St	ate:		egory: Open	/ Reserve			eserved: SC / ST / DT(A) / NT(E								
Caste:		Sub-Caste:					nallenged: Visually Impaired / entally Retarded	Speech and/or H	earing Impa	ired /	Orthop	edic			
3. Social Re	servation In	formation Sec	tion [Check	(√) which			le, write name of supporting d	ocument attache	d, in section	6.1					
	eman/Ward of E					Member of Project Affected Family									
Active-Serviceman/Ward of Active-Serviceman						Member of Earthquake Affected Family									
Freedom	Freedom Fighter/Ward of Freedom Fighter						Member of Flood / Famine Affected Family								
	Ward of Primary Teacher						Resident of Tribal Area								
	Ward of Secondary Teacher						Kashmir Migrant								
	/Divorced/Wido														
		ers Section [Wri	te paper codes	or Paper N	ame only,			ladiu Fia co		L.A	-,,				
	ster: 1/3/5/	/				_	mester: 2/4/6/8 (If decid	aea in First Se	mester on	ıy)					
1. 2.							2.								
3.				3.											
4.						4.									
5.						5.									
6.						6.									
7.							7.								
8.						8.									
9.						9.									

Form No.:															
	5. Educational 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 examinations] Please Note: 10 th Details are mandatory in any case														
							Yea		-	Roll No.:					
Name of Examination		Name of Board /University		ame of School/Colleg	ge	Date of Passing (DD/MM/Y YYY)		mination Seat No. (Last)	Passing Certific ate No.	Grade / Total Out Marks of Obtained		22.32.22.22	Qualifying Examination? (YES/NO)		
Std 10 th															
Std 12 th											\top				
6. Guardian Information Section Guardian's Name:															
Occupation of the Guardian: Service / Business / Profession / Farmer / Laborer / Retired Annual Income of the Guardian (Rs.):															
Relationship of guardian with applicant:								(last financial year) Phone No.:							
7. Attached Documents and Certificates Section															
Sr. No.	Sr. No. Name of Document/Certificate								Original / Attested True Copy Attached (Yes/No)						
1	8	assing Certificate of Std 10 th							Attested True Copy (Mandatory)						
2		Certificate of Std 12 th / Statement of Marks of Std 12 th						Attested True Copy							
3	Leaving Certificate	with Catagon						Original							
5		cate of Caste with Category							Attested True Copy Attested True Copy						
6		amy Layer Certificate A for changed name/ Marriage Certificate / Govt. Gazette							У						
7	Domicile Certificate	u name, wan	lage ce	rtincate / Govt. Ga	Attested True Copy										
8	Certificate for Physic	rally Challenge	ed		-	Attested True Copy									
9	Adhar Card	carry chancings	Attested True Copy	-											
10	Name in the Voto	r List													
	Information Sec							Yes / No							
Mother To				Employment Stat	tus: Empl	loyed / Unem	ploye	ed	Do you v	wish to join	NCC /	NSS : Y	res / No		
Would you like to apply for Hostel: Yes / No															
Hobbies, P	roficiency and Other	Interests:													
	d Sports participation college/state/nation		al etc.):												
Personal Identification Marks: 1.								2.							
	ration by Studen														
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 to 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 and/or admission will stand cancel. I am aware of the Maharashtra Prohibition of Ragging Act, 1999 and I state that I will abide by all the rules and regulations of the said Act. Place:															
Date:	aration by Guard	ian				Signature o	of the	student:							
	rmitted my son/da		l to joi	n your college. Th	he infor	mation supp	olied	by him/her is cor	rect to t	he best of	my kr	nowle	dge. I have		
acquainte	ed myself with the	rules and fee	es, due	s to my son/daug	ghter/w	ard and to s	ee th	nat he/she obser	ves.						
Date:						Signature o	of the	Guardian:							
	College/Institute										1.1.1				
Designation	ignation Remarks / Particulars / Recommendations									Signature ar	nd dat	e			
	ssion Committee														
Accountar		Cash Receiv	Cash Received: Rs. Receipt No.:												
Registrar/ Superinter															
Principal/I															
rincipal/I	Jilettoi														

Note: Student shall retain photocopy of completely filled in admission form (both pages) for future reference.

