

Open Category - Price Rs.300/-
Reserve Category - Price Rs.200/-



FORM NO: _____
Admitted.

(Signature of Authority).

Photo

SANT GADGE BABA AMRAVATI UNIVERSITY
APPLICATION FORM FOR ADMISSION (2009-2010)

TO

THE REGISTRAR,
Sant Gadge Baba Amravati University,
Amravati.

I request admission to _____ class in the subject _____ conducted by the Sant Gadge
Baba Amravati University.

Signature of Applicant

1	Name In full (CAPITAL LETTERS & Surname first)									
	Name in Devnagari (Marathi)									
2	Name of the Father/ Husband/ Guardian									
	Occupation		Annual Income							
3	Name of the Mother									
	Occupation		Annual Income							
4	Address with PIN CODE	Residential								
		Correspondence								
		Residence	Urban / Rural / Hill area							
5	Phone		Fax							
	Mobile		E-mail							
6	Date of Birth		Nationality							
7	Sex	Male / Female	Whether resident of Maharashtra?	Yes/ No						
8	Whether Physically Handicapped?	Yes/ No	Whether in service?	Yes/ No						
	Whether GOI/ PTC/ EBC / Scholarship Holder? If yes give order details.									
9	Category	OPEN	SC	ST	VJ	NT-B	NT-C	NT-D	OBC	PH
10	Qualifying degree			Name of University						
	Enrollment no.			Name of the state						
11	Whether had Mathematics at XII th Standard? If yes give marks.	Yes/ No		Whether qualified at University Test (If yes, mention Score.)		Yes/ No		Score:		
		Marks								

12 Details of the examinations passed.								
Certificate / Degree	Month & Year of Passing	Board / University	Major Subjects	Total marks Scored	Maximum Marks	Percentage	No. Of Additional Attempts	
S.S.C. (X)								
H.S.C. (XII)								
UG								
PG (Part-I)								
PG								
Diploma								
Other								

13 Details of participation in games /sports/curricular / co-curricular activities.					
Level:	Particulars	Year	Major Achievement	Remarks	
National					
State					
Regional					
University					
College					

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DECLARATION OF APPLICANT

I declare that the above statements made by me in this application are true and correct. On admission, I promise to pay the prescribed fees as required and to abide by the rules and regulations of the University regarding attendance, discipline and other matters and instructions of the Head of the Department. I submit myself to the disciplinary jurisdiction of the Honorable Vice-Chancellor under the provisions of the act. Further I declare that I attach herewith Physical Fitness and other certificates separately.

Date

Signature of the Applicant

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DECLARATION OF FATHER/ GUARDIAN/ HUSBAND.

I certify that the applicant is my son/daughter/ward/wife and the particulars given above are correct. I agree that on my son/daughter/ward/wife's admission, I undertake to pay all the fees and other charges due and payable under and in accordance with the rules at the time and place specified therein. I further agree that if the fees and other charges payable are not paid in due time, the same may be recovered from me through legal process. This agreement shall be binding upon me for the entire duration of the course.

Date:

Signature of Father/Guardian/Husband

NOTE: Incomplete form in any respect will be Rejected.