

**Dr.D.Y.Patil Vidyapeeth (Deemed University)**

Pimpri, Pune – 411 018

**EXAMINATION FORM**

**For Office use only**

Exam Fees Rs. : \_\_\_\_\_ Receipt No. : \_\_\_\_\_ Exam Month & Year : \_\_\_\_\_

**The Controller of Examinations,**

Dr. D.Y. Patil Vidyapeeth

Pimpri, Pune – 411 018

Sir,

I request permission to present myself at the ensuing Examination for the

Examination to be held in the month & year   
MONTH YEAR

1.Name of the College :

2.Student's PRN

3.Name of the Student :   
As it appears in the  
Higher Secondary  
Certificate  
LEAVE ONE SQUARE BLANK AFTER EACH WORD

4. Aadhaar Card No : \_\_\_\_\_

5. Address : \_\_\_\_\_

PIN Code : \_\_\_\_\_ S.T.D. Code : \_\_\_\_\_ Tel. No.: \_\_\_\_\_

6. Male/Female: \_\_\_\_\_ 7.Category : (General/ NRI / FN / PIO ): \_\_\_\_\_

8. Date of Admission: \_\_\_\_\_

9. I will be appearing for the following subjects :

Sr. No.	Name of the Subject	Paper Numbers
1		
2		
3		
4		
5		
6		
7		
8		

## DECLARATION

1. I hereby declare that I have gone through the syllabus prescribed for the examination for which I am appearing.
2. I shall be responsible if my application form is rejected for any errors, wrong or incomplete entries made by me in the examination form.
3. I hereby declare that I shall not claim any concession on religious ground.
4. I am not defying the criteria of the admission order.

Yours faithfully,

Date :

Place :

Signature of the student

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## **DECLARATION TO BE SIGNED BY THE HEAD OF THE INSTITUTION**

I certify that

Shri/Smt./Kum.: \_\_\_\_\_ is a bonafide student of this college and has satisfactorily attended the classes and that his/her

1. Attendance is not less than 75% in lecture teaching & in practical work.
2. Eligibility in cases of NRI, AIET, etc has already been sought (wherever applicable)
3. I further certify that the candidate is attempting for first time and as per the University rules he/she is eligible to appear.
4. The student has completed the terms as per University rules.
5. He/she is not admitted to the course after the cut-off date for grant of term.

**Attested copy of previous mark sheet must be enclosed.**

Yours faithfully,

Date :

Signature & seal of the Dean/Director/Principal