Dr.D.Y.Patil Vidyapeeth (Deemed University) Pimpri, Pune – 411 018 EXAMINATION FORM

For Office	e use only			
Exam Fe	es Rs.:	Receipt No. :	Exam Mo	onth & Year:
Dr. D.Y.	troller of Exami Patil Vidyapeeth June – 411 018	nations,		
Sir,				
I request p	ermission to present	t myself at the ensuing Exa	amination for the	
Examination	on to be held in the n	nonth & year	MONTH	YEAR
1.Name of	the College :			
2.Student's	PRN			
As it app	the Student : ears in the Secondary	LEAVE ONE	SQUARE BLANK AF	TER EACH WORD
4. Mother	's Name :			
5. Aadhaaı	Card No :			
6. Addres	s:			
PIN Code	:	S.T.D. Code:	Tel. No.:	
7. Male/F	emale:	8.Category: (General/ I	NRI / FN / PIO): _	
9. Date of	Admission:			
	e appearing for the	e following subjects:		
Sr. No	Name of the Su	bject		Paper Number
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				
	DECLARATION TO BE SIGNED BY THE HEAD OF THE INSTITUTION				
I certi	fy that				
	Shri/Smt./Kum.: is a bonafide student of this college as satisfactorily attended the classes and that his/her				
	Attendance is not less than 75% in lecture teaching & in practical work. 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.	4. The student has completed the terms as per University rules.				
5.	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				