

Form Fee: 50`

3. Affidavit for change in name

(For Post Graduate Courses/PH.D/ M.Phill)

1.	Name of the C	Course to w	hich app	olication	is sought				_ Year : 1	st / 2 nd / 3	rd /4 th / 5
2.	Name in full of Name as per last		_	-	-	-	ould write	their name	e as it ap _l	pears in their	Passport.
_	Mother's Name	e					l- + -: -	/ NI			
4. 6.	Nationality Gender:	Male / Fe	male			ype: Mana Date of Bir			on- ivian	arashtrian	
		·						DD	MM	YYYY	_
8.	Reserved Cates Do you belong If so attach a ce	to any of th		•	•	_	fit	Ī			
	ck mark √ in	0::-::		CT.	DT(A)	NIT/D)	NIT/C\	NIT(D)	ODC	CDC	
ар	plicable box)	Open	SC	ST	DT(A)	NT(B)	NT(C)	NT(D)	OBC	SBC	
	Particulars of t		_								
2.	-	ourse rsity									
2.	Name of the Co	ourse rsity	cute /Un	iversity							
2.	Name of the Co Name of Unive Name of the Co	ourse rsity ollege/Instit	ute /Un	iversity h & Year	Dept Of Passing						
2.	Name of the Co Name of Unive Name of the Co Seat No.	ourse rsity ollege/Instit	ute /Un	iversity h & Year	Dept Of Passing	3	Percer		Class		2
2. 3.	Name of the Co Name of Unive Name of the Co Seat No.	ourse rsity bllege/Instit	Montl Montl Seat	h & Year	Of Passing Month & Yes (if yes ple	Year Of Pa	Percer ssing fy type v	ntage	Class	s/Grade Class/Grade	
2. 3.	Name of the Co Name of Unive Name of the Co Seat No.	ourse rsity bllege/Instit	Montl Montl Seat	h & Year	Of Passing Month & Yes (if yes ple	Year Of Pa	Percer ssing fy type v	Percentag	Class ge given be	Class/Grade	
10	Name of the Co Name of Unive Name of the Co Seat No. Seat No. Last Examinat Are you below	ourse rsity pollege/Instit	Montl Montl Seat	iversity h & Year ils if any No. P No/ Ye	Dept Of Passing Month & Y es (if yes ple tic:	Year Of Pa	Percer ssing fy type v	Percentag	Class ge given be	s/Grade Class/Grade	
2. 3. Pl	Name of the Co Name of Unive Name of the Co Seat No.	ourse rsity ollege/Instit	Monti	iversity h & Year ils if any No. P No/ Ye	Dept Of Passing Month & Y es (if yes ple tic:	Year Of Pa	Percer ssing fy type w	Percentag	Class ge given be	Class/Grade	

7. Transfer Certificate

To be filled by College/Institute / University Department

Receipt No.	Date:	Eligible / Not Eligible
Asst.	Sr. Asst.	O.S./Registrar /HOD

Physical Handicap Types:

P1	Blind /Visually impaired/अंध/दुष्टिहीन
P2	Dumb and Deaf /मुकबधिर
P3	Orthopedically impaired/ अस्थिव्यंग
P4	Mentally Challenged/मतिमंद/गतीमंद वगैरे
ОТ	Other Physical disabilities

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ANNEXURE 'A' ELIGIBILITY FEE

1. Student passing qualifying examination and seeking admission FirstTime to First Year of any Degree/Diploma/Certificate (U.G/P.G.) the Eligibility Fee will be as under:

Sr. No.	Particulars	Fees		
140.		Non-professional	Professional	
		Rs.	Rs.	
1.	Within the State of Maharashtra	100	200	
2.	From outside the State of Maharashtra	200	300	
3.	From any foreign country (Out of India) and	500	1000	
	(NRI/Foreign Citizen-Foreign National, P.I.O.)			
4.	A Student passing qualifying examination from			
	Pune University and seeking admission to			
	second degree/diploma/certificate U.G/P.G. of			
	our University and is Domiciled in Maharashtra			
a)	Domiciled outside Maharashtra State	100	200	
b)	NRI/Foreign Citizen/Foreign National, P.I.O.	200	300	
c)	Eligibility fee for issue of provisional	500	1000	
5.	eligibility certificate			
	For (1)			
	and for (2) & (3)	100	200	
	Eligibility Form Fee	300	500	
6.		50	50	