



Savitribai Phule Pune University
Design Innovation Centre (DIC)
Application Form for DIC Courses
 Select the course (Tick any one)

Paste your recent color passport size Photo. Sign on it.

Advanced and Innovative techniques for Environment and Watershed Management	Department of Environmental Science, SPPU	<input type="checkbox"/>
Chromatographic Techniques for Designing Forensic and Industrial Applications	Department of Chemistry, SPPU	<input type="checkbox"/>
Advanced Techniques for improvement of Plant Growth and health using soil microorganisms	Department of Botany, SPPU	<input type="checkbox"/>

Application Form Number:

Personal Data:

Surname: _____ First Name: _____ Middle Name: _____
 Date of Birth: _____ Gender: _____

Address for Correspondence:

City: _____ State: _____ Pin: _____
 Phone: _____ Mobile: _____ Email: _____

Reservation Information:

Category:		
Physically Handicapped:		State of Domicile:

Qualifying Examination:

Name of Exam:	Status:	Month and Year of passing / Appearing:
University:	Aggregate Percentage of Marks/CGPA:	Percentage of Marks/CGPA in Principal Subject :

Details of Qualifying Examination:

Year/Semester	Subject (s)	Total Marks Obtained	Out of	Percentage
B.Sc.				

Present Employment: (Attach additional documents, if required)

Name of Organization	Designation	Years of experience

Documents to be submitted along with Application from

1	Self attested copies of Statement of marks of the qualifying examination (Note: In case of candidates whose results are awaited, statement of marks would have to be Submitted after the declaration of results and their admission to the course is subject to the fulfillment of the eligibility criterion)	
2	Leaving certificate of previously attended educational Institute.	
4	Reserved Category Certificate from the competent authority (applicable to candidates belonging to reserved category with domicile in Maharashtra only) and cast validity certificate as a supporting document.	
5	Attested true copy of latest Creamy layer free certificate, If available. (for N T (c) N T (D) , OBC)	
6	For the candidates having physical disability : Attested true copy of minimum 40% physical disability certificate from competent authority (District Civil Surgeon).	
7	Attested true copy Domicile certificate	

Declaration: I hereby declare that all statements made in this application are true, complete and correct to the best of knowledge. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected. I am aware that I need to obtain and produce my Original Certificates enlisted above at the time of admission.

Place: _____ **Date:** _____ **Please Sign inside box**
 Name:

IMP NOTE: Please submit the form along with the documents to the respective departments, as mentioned above.