



University of Pune

THIRD YEAR EXAMINATION IN BACHELOR OF DESIGN (Furniture Design)

P.R.No.

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Seat No.

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Year October/April

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UNIPUNE ID No.

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(Number given by Eligibility Section)

To,
The Controller of Examinations,
University of Pune,
Pune-411007.

Sir,

I request permission to present myself for the Examination in the Third Year Ist Term / IInd Term Examination in B.Design to be held in Oct./April 200 and pay herewith the prescribed fee Rs. ().

Yours faithfully,

Date :.....

.....
Signature of the Candidate.

NSS	NCC	NPED	AED	TOURNAMENTS			Not Applicable
				IU	N	IN	
1	2	3	4	5	6	7	8

SC	ST	OBC	DT	NT	Not Applicable
C	T	O	D	N	

College :

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Sex. : Male

	1
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Centre :

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Female

	2
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Name :
(In Capital Letters) Surname First Name Father's / Husband's Name.....
Mother's Name

SOUTH INDIANS / OTHERS SHOULD ENTER THE NAME IN USUAL FORM (i.e. as per XII or Equivalent Exam.Record)

Permanent Regn. No. (if applicable)

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This is my attempt for Third Year B.Design Exam. No.of Courses appearing**

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Last appearance at B.Design Exam.
details if applicable (pl. tick) Month

April 04	Oct. 10
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 Year

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 Seat No.

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Last appearance at B.Design Exam.
details if applicable (pl. tick) Month

April 04	Oct. 10
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 Year

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 Seat No.

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Whether simultaneously appearing for more than one Examination viz. [F.Y./S.Y.] OR [S.Y./T.Y.] (please tick) : YES/NO

If "YES", give details :

* The student who has participated in one of the extra-curricular activity should fill in the prescribed form for this purpose.

** Paper / Term Work / Sessional / Oral each is considered as separate course.

[Certificate to be signed by the Principal of the College of Architecture at which the Candidate has studied]

I certify that Shri. / Smt.

- (1) has attended adequate number of days required as per rules.
- (2) has completed to my satisfaction the prescribed Term Work / Oral / Sessional Work, etc. in the subject concerned.
- (3) is to the best of my knowledge and belief, a person of good conduct and has my permission to appear at the ensuing Third Year B.Design Examination.
- (4) Any contravention found in this connection at a later date will be informed to the University authorities before the commencement of the examination for necessary action.

I also certify that his / her statement as to his / her having passed in the Papers and / or Sessional, Term Work, Oral, etc. named above at a previous examination is correct.

Place :

Signature :

Date : 200

PrincipalCollege.

Address for Correspondence :

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Third Year B.Design examination (Furniture Design)

Subject			Subject			
TERM I			TERM II			
	S	O		P	S	O
313486	Craft Documention	<input type="checkbox"/>	313494	Elective - II	<input type="checkbox"/>	
313487	Elements of Form - III	<input type="checkbox"/>	313495	Element of Form - IV		<input type="checkbox"/>
313488	Ergonomics - III	<input type="checkbox"/>	313496	Dissertation	<input type="checkbox"/>	
313489	Material and Procesess - III	<input type="checkbox"/>	313497	Material and Procesess - IV	<input type="checkbox"/>	<input type="checkbox"/>
313490	Exposure to Liberal Arts - III	<input type="checkbox"/>	313498	Seminar	<input type="checkbox"/>	
313491	Advanced Photography	<input type="checkbox"/>	313499	Design Project - IV		<input type="checkbox"/>
313492	Computers - III	<input type="checkbox"/>	313500	Computers - IV	<input type="checkbox"/>	
313493	Design Project - III	<input type="checkbox"/>				