



PRICE : Rs. 30/-

UNIVERSITY OF PUNE

Application Form for Certificate Course in Forensic and Medical Jurisprudence (2002-2003)

To THE CONTROLLER OF EXAMINATIONS, UNIVERSITY OF PUNE, PUNE-411007.

For Office use only
Batch & Sr. No.

Sir, I desire to appear for the examination for the Certificate Course in Forensic and Medical Jurisprudence Examination to be held in October/April 20 - 20 .

I hereby declare that I shall not claim any concession on religious grounds.

- 1. Name of the College :
2. Name of the Centre :

Table with columns: Male, Female, Fresh, Repeater and rows 1, 2.

No. of Courses/Subjects

* Applicant other than Maharashtra i.e. from South India, U.P. Up-countries and Foreigners should write the name as it should appear on University records. No change in the name will be made hereafter.

- 4. * Mention Full Name in legible BLOCK Letters :

Surname Name Father's/Husband's Name (if necessary) Mother's Name (as per Previous Records)

- 5. Name in Devnagari Script :

Exam. Fee Rs.
Statement of Marks Fee Rs. :
Passing Certificate Fee
CAP Fee Rs. :
Late Fee Rs. :
Total Fee : Rs.

- 6. Old Name, if any :

Table with columns: N.S.S, N.C.C, N.P.E.D, A.E.D, I.U.T and rows 1, 2.

Table with columns: SC, ST, OBC, DT/NT, Not Applicable and rows C, T, O, D.

- 9. Year 20 Month & Seat No. For the previous Latest Appearance

- 10. Permanent Registration Number of Certificate Course in Forensic & Medical Jurisprudence (Should be mentioned correctly)

Subject for which appearing : No. of courses appearing

(Write Subject names & Subject Codes from the back side of this Page very carefully)

Table with columns: Subject Name, Subject Code and rows for subject information.

- 11. Name of Degree of qualifying examination, Date of passing and the name of University :

- 12. Eligibility Certificate number and date, if applicable :

- 13. Address for Correspondence :

- 14. Permanent Home Address :

EXAMINATION PARTICULARS

Attach Attested True Copy of Marklist of Last Certificate Course in Medical Jurisprudence Examination along with Examination Form.

Table with 4 columns: Code No., Name of the Subject, Tick here only if you are appearing for the Subject, Tick here if claiming exemption for the Subject. Rows include Forensic Science and Criminal Investigation, Forensic Medicine and Toxicology, Medical Negligence and Liability, and Practical Training and viva voce.

* If Passed then give the information Seat No. Month & Year

DECLARATION

I hereby declare that I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I WILL BE RESPONSIBLE for any errors and wrong or incorrect information supplied by me in the application form.

Yours faithfully,

..... Place Date Signature of the Candidate

CERTIFICATE

I certify that the above named candidate obtained the degree of from the University of in year and is a regular/ex-student of this College.

He / She has presume for the number of days specified below, attached during two terms, the course of lectures appointed for this examination :

Table with 4 columns: Terms, Number of Days, Remarks. Rows show terms from June 20 to October 20 and From Nov. 20 to April 20.

..... Place Date Stamp Signature of the Principal

Student desirous to avail of the benefit of O.163 will have to fill in separate prescribed form which is available in the College. The form should be attached, with necessary fees and certificates, alongwith the concerned examination form.