Price: Rs. 20/-

То



University of Pune

Examination for the Diploma Course in

(१) माध्यमिक हिंदी अध्यापन पदविका

(२) प्रयोजनमूलक हिंदी पदविका

The Registrar, University of Pune Ganeshkhind, Pune-411007

(३) हिंदी अनुवाद पदविका पाठ्यक्रम

Examination	
Seat No.	

		Seat No	•
I request permission to present n	nyself at the Dipl	oma/Certificate Course in Hin	di Examination to be held
in May			
I hereby declared that I shall no	t claim any conce	ession on religious grounds.	
			Yours faithfully,
Place:			
Date :		Signature:	
	PERSONAL	L DETAILS	
(Application from South India & Upco	ountries should wri	te the Name as should appear o	n the University Record).
Name in Full	Name		
(Also in Devanagari Script)			
Race and Religion			
Male or Female			
College or Colleges attended			
Student of Ex-Student Date of passing the Graduation Examination with Hindi or Certificate Course in Hindi or an equivalent or higher Examination in Hindi			
Residential Address			
I desire to appear at the	Ce	ntre.	
	en by the Princip	F I C A T E pal/Head of the Department)	1
Certified that Shri./Smtsince passing his / her graduate or Ce has attended during two terms, the co	rtificate Course in	Hindi or an equivalent or high	
Terms		Number of Days	Remarks
From 1st August 20 to Octobe	er 20		
From January 20 to April	20		
Place :			
Dated :		Head of t	he Department/Principal