

Price : Rs. 20/-

No. 14979

[Note :—After remitting fees in Bank, please hand over this form to your Department with fee receipt.]

UNIVERSITY OF PUNE



Examination Seat No.
To be filled in by the Office

APPLICATION FOR ADMISSION TO THE M.A./M.Sc. SEMESTER I / II / III / IV EXAMINATION

To,

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

Sir,  
I desire to appear for the examination for the Semester I / II / III / IV for the Degree of MASTER OF ARTS/SCIENCE Examination to be held in November/December April/May 200

EXAMINATION DETAILS

- Name of the Department .....
- Examination CENTRE at which appearing .....
- Subject for M.A./M.Sc. : (1) Principal Subject ..... (2) Optional Subject .....
- Address for Correspondence .....  
..... Mobile No. .... Phone No. (Res./Office) .....
- Detail information for the previous latest appearance at M.A./M.Sc. Semester I / II / III / IV Examination (if applicable)  
Seat No. .... Year 200 ..... Month .....
- Please tick in appropriate box :

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

7. If exempted from paying examination fees tick (✓) the right category :

BC	EBC	NT/DT	Freedom Fighters Children	Service Personnel Children	Primary Teachers Children
B	E	N	F	S	P

7A.	Male	Female
	1	2

- Name of Degree of qualifying examination, Date of passing and the name of University .....
- I pay herewith Rs. .... as Examination Fee,  
details of which are : .....
- Eligibility Certificate No. and date (if applicable) .....
- Name\* .....  
(IN CAPITAL LETTERS) Surname Name Fathers/Husband's Name  
(\*Applicants from South India and upcountries should write the name as it is written on the Eligibility Certificate obtained from University.)  
(Name in Devnagari Script) .....
- Name before Marriage .....  
(if applicable) .....
- Permanent Registration No. of M.A./M.Sc.

(Tick (✓) right category)  
 No. of Credits   
 No. of Courses   
 Examination Fee .....

CAP  
Statement  
Passing Certificate  
Late Fee .....

Total

Declarations

I hereby declare that I have gone through the syllabus and the list of books prescribed for the above examination for which I am appearing. I will be responsible for any errors and wrong or incorrect information including Name of the subject/s, Course Nos and Papers mentioned on Page 2, by me in the application form. I shall not request for special concessions such as change in the time and/or the day fixed for the University examination of religious or any other grounds. The courses mentioned by me are as per University rules and regulation.

Yours faithfully,

..... Place ..... Date ..... Signature of the Candidate

CERTIFICATE

I certify that the above named candidate has passed Semester I / II / III / IV ..... Examination from the University of ..... in year ..... and is a regular Department. The courses mentioned by the candidate are as per University rules and regulations. To the best of my knowledge and belief the entries made by the candidate in the application are correct. He/She has my permission to appear for examinations for the subjects for which he/she has applied.

..... Place ..... Date ..... Stamp

..... Signature of the  
Head of the Deptt...

[P.T.O.]

For Bank Use only
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**INSTRUCTIONS**

1. Please write down correct and complete information.
2. Candidate will be entirely responsible for incorrect and/or incomplete information.
3. Write down only those courses for which you *would be appearing* for the Semester examinations.
4. Course Number should be checked and correctly written as appearing in the Syllabus

Sr. No.	Course Code	Title of the Course	Credits	Year and Month	Seat No.
Semester I					
Compulsory					
1					
2					
Optional					
3					
4					
Semester II					
Compulsory					
1					
2					
Optional					
3					
4					
Semester III					
Compulsory					
1					
2					
Optional					
3					
4					
Semester IV					
Compulsory					
1					
2					
Optional					
3					
4					

( \* Not Applicable for External & Regular Candidates. )

Date : .....

.....  
Signature of the Candidate

**FACULTY OF ARTS/**  
**Mental, Moral & Social Sciences**  
 003/322 1000  
 (FOR COLLEGE THROUGH  
 UNIVERSITY FINANCE BRANCH)

**A**

**BANK OF MAHARASHTRA**

Branch

Name .....  
 (In full and Block Letters)

Address .....

Name of Course .....

Place .....

Date : .....

Paid into the credit of UNIVERSITY  
 OF PUNE the sum of Rs. ....  
 (Rupees ..... )

Particulars	Rs.
1. EXAMINATION FEE For Admission to ..... Sem. : ..... Year : ..... Name of the Subject .....	
2. No. of Courses offered .....	
3. No. of Credits : .....	
4. LET FEE (If any) ..... 003/320 1000	
5. STATEMENT OF MARKS FEE 003/320 5000	55
6. C.A.P. Fee	
<b>Total Rs.</b>	

Receiving Cashier

Seal of the Bank.

**FACULTY OF ARTS/**  
**Mental, Moral & Social Sciences**  
 003/322 1000  
 (FOR BANK)

**B**

**BANK OF MAHARASHTRA**

Branch

Name .....  
 (In full and Block Letters)

Address .....

Name of Course .....

Place .....

Date : .....

Paid into the credit of UNIVERSITY  
 OF PUNE the sum of Rs. ....  
 (Rupees ..... )

Particulars	Rs.
1. EXAMINATION FEE For Admission to ..... Sem. : ..... Year : ..... Name of the Subject .....	
2. No. of Courses offered .....	
3. No. of Credits : .....	
4. LET FEE (If any) ..... 003/320 1000	
5. STATEMENT OF MARKS FEE 003/320 5000	55
6. C.A.P. Fee	
<b>Total Rs.</b>	

Receiving Cashier

Seal of the Bank.

**FACULTY OF ARTS/**  
**Mental, Moral & Social Sciences**  
 003/322 1000  
 (FOR CANDIDATE / STUDENT)

**C**

**BANK OF MAHARASHTRA**

Branch

Name .....  
 (In full and Block Letters)

Address .....

Name of Course .....

Place .....

Date : .....

Paid into the credit of UNIVERSITY  
 OF PUNE the sum of Rs. ....  
 (Rupees ..... )

Particulars	Rs.
1. EXAMINATION FEE For Admission to ..... Sem. : ..... Year : ..... Name of the Subject .....	
2. No. of Courses offered .....	
3. No. of Credits : .....	
4. LET FEE (If any) ..... 003/320 1000	
5. STATEMENT OF MARKS FEE 003/320 5000	55
6. C.A.P. Fee	
<b>Total Rs.</b>	

Receiving Cashier

Seal of the Bank.

**FACULTY OF ARTS/**  
**Mental, Moral & Social Sciences**  
 003/322 1000  
 (FOR UNIVERSITY EXAMINATION  
 BRANCH)

**D**

**BANK OF MAHARASHTRA**

Branch

Name .....  
 (In full and Block Letters)

Address .....

Name of Course .....

Place .....

Date : .....

Paid into the credit of UNIVERSITY  
 OF PUNE the sum of Rs. ....  
 (Rupees ..... )

Particulars	Rs.
1. EXAMINATION FEE For Admission to ..... Sem. : ..... Year : ..... Name of the Subject .....	
2. No. of Courses offered .....	
3. No. of Credits : .....	
4. LET FEE (If any) ..... 003/320 1000	
5. STATEMENT OF MARKS FEE 003/320 5000	55
6. C.A.P. Fee	
<b>Total Rs.</b>	

Receiving Cashier

Seal of the Bank.