



Vasantrao Naik Mahavidyalaya, Aurangabad

Affiliated to Dr. Babasaheb Ambedkar Marathwada University, Aurangabad

For College	Course Admitted	to	Form No.								
Use only	Admission Date :	/ /		Please Paste a Passport Size							
 Please use bla Please fill in a Please strike o 	es, Read Before Filling-in ck ink to fill in the form Il fields in CAPITAL letter Iff whichever is NOT app a Male :> Gender : Male	and do NOT overwrite. s only. licale.	Student should sign strickly inside box only with black ink.	(35mm x 45 mm) Photograph here, Do not staple							
1. PERSONAL	INFORMATION SE										
		Last Name	First Name	Middle Name							
Name of the s											
(Incase of cha write current											
Father's / Hus	· · · · · · · · · · · · · · · · · · ·										
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	her marriage)										
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(Incase of changed name)											
Reason for name changed : Willingly / After Marriage											
Marital Status : Unmarried / Married / Divorced / Widowed / Destered											
Date of Birth : Gender : Male / Female											
Place of Birth : Blood Group (with Rh) :											
Religion: Citizen of (Country Name):											
		ADDRESS FOR COR									
State :	District :	Tehsil:	City / Town / Vill	age:							
Address (House No. Street / area etc.) :											
			PIN CODE :								
PERMANENT ADDRESS (Write only if different Address for Correspondence)											
State :	District :	Tehsil:	City / Town / Vill	age:							
Address (Hous	se No. Street / ared	a etc.) :									
	PIN CODE :										
Phone # 1 : Ar	ea / STD Code		Mobile No.								
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Aadhaar No.											
2. LEGAL RESE	RVATION INFORM	NATION SECTION									
Domicle of St	ate:	Cat	tegory: Open / Reserved								
If Reserved:	SC / ST / DT(A) / N	T (B) / NT(C) / NT(D) /	/ OBC / SBC								
Caste : Sub Caste :											
		ly impared / Speech o	and / or Hearing Impared / (Orthopedic Disorder or							
Mentally Reta	rded.										
3. SOCIAL RES	ERVATION INFOR	MATION SECTION (C	heck (ⓐ) whichever is applic	cable, write name of							
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	n / Ward of Ex-serv		Member of Project affected Family								
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	ter / Ward of Free	dom Fighter	Member of Flood / Famine Affected Family								
Ward of Primo			Resident of Tribal Area								
Ward of Secon			Kashmir Migrant								
Desrted / Divo	orced / Widowed V	Vomen									
Occupation of the Guardian: Service / Business / Profession / Farmer / Labourer / Retried											
Annual Income of the Guardian (Rs.) :											

			CTION : (Write "Yo seeking admission			_	-				
Nar	ne of am.	Name of Board University	Name of School / College		Exar	n. on o. (Last)	Degree / Passing Cert. No	Grade Total Marks Obtained		Qualifying Exam. (Yes / No)	
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	TACH	ED DOCUMENT	S AND CERTIFICA	ATES SECTI	ON:						
Sr. No.	Name of Document / Certificate			Original / Attested True Copy				Attested (Yes / No)			
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7.	Marriage Certificate / Govt. Gazette Domicile Certificate			Attested True Copy							
8.	Certificate for Physically Challenged			Attested True Copy							
9.											
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7. O	THER I	NFORMATION	SECTION								
		ngue :			ent Sta	tus : En	nployed /	Unemploye	d		
			/NSS / NUSSD :	Yes / No							
Hob	bies ar	nd other intere	sts								
8. DECLARATION BY GUARDIAN I hereby declare that, I have read the rules to admission and the information filled in by me in this form is accurate and true to the best or my knowledge. I will be responsible for any discrepancy, arising out of form signed by me and I undertake that, in absence of any document the final admission will be granted and / or admission will stand cancel.											
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Date	?:				5	Signatu	re of Stud	ent			
9. DI		ATION BY GUAI									
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