



Vasant Rao Naik Shikshan Prasarak Mandal Aurangabad's
Vasant Rao Naik Mahavidyalaya, Aurangabad
Affiliated to Dr. Babasaheb Ambedkar Marathwada University, Aurangabad

For College	Course Admitted to	Form No.
Use only	Admission Date : / /	
<i>Importance Notes, Read Before Filling-in-Form :</i> 1. Please use black ink to fill in the form and do NOT overwrite. 2. Please fill in all fields in CAPITAL letters only. 3. Please strike off whichever is NOT applicable. E.g. if you are a Male => Gender : Male / Female		
		Student should sign strickly inside box only with black ink .

Please Paste a
Passport Size
(35mm x 45 mm)
Photograph here,
Do not staple

1. PERSONAL INFORMATION SECTION

	Last Name	First Name	Middle Name
Name of the student (Incase of changed name, write current name)			
Father's / Husband's Name			
Mother's Maiden Name : (Name before her marriage)			
Previous Name of the student (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 CORRESPONDENCE			
State :	District :	Tehsil :	City / Town / Village :
Address (House No. Street / area etc.) :			
PIN CODE :			
PERMANENT ADDRESS (Write only if different Address for Correspondence)			
State :	District :	Tehsil :	City / Town / Village :
Address (House No. Street / area etc.) :			
PIN CODE :			
Phone # 1 : Area / STD Code	Mobile No.		
Phone # 2 : Area / STD Code	E-mail ID :		
Aadhaar No.			
2. LEGAL RESERVATION INFORMATION SECTION			
Domicile of State :	Category : Open / Reserved		
If Reserved : SC / ST / DT(A) / NT (B) / NT(C) / NT(D) / OBC / SBC			
Caste :	Sub Caste :		
If Physically Challenged : Visually impared / Speech and / or Hearing Impared / Orthopedic Disorder or Mentally Retarded.			
3. SOCIAL RESERVATION INFORMATION SECTION (Check (☑)) whichever is applicable, write name of supporting document attached in section 6)			
Ex-serviceman / Ward of Ex-serviceman		Member of Project affected Family	
Active Serviceman / Ward of Active Serviceman		Member of Earthquake affected Family	
Freedom Fighter / Ward of Freedom Fighter		Member of Flood / Famine Affected Family	
Ward of Primary Teacher		Resident of Tribal Area	
Ward of Secondary Teacher		Kashmir Migrant	
Desrted / Divorced / Widowed Women			
Occupation of the Guardian : Service / Business / Profession / Farmer / Labourer / Retried			
Annual Income of the Guardian (Rs.) :			

4. EDUCATION DETAIL SECTION : (Write "YES" in last column, against the qualifying examination, on the basis of which you are seeking admission to the said course write NO in front of other examination.)

Name of Exam.	Name of Board University	Name of School / College	Date of Passing	Exam. on Seat No. (Last)	Degree / Passing Cert. No	Grade Total Marks Obtained	Out of	Qualifying Exam. (Yes / No)
Std. 10								
Std. 12								

5. SELECTED DETAILS SECTION : (Write Paper codes Only, in the boxes)

1.	3.	5.	7.	9.
2.	4.	6.	8.	10.

6. ATTACHED DOCUMENTS AND CERTIFICATES SECTION :

Sr. No.	Name of Document / Certificate	Original / Attested True Copy	Attested (Yes / No)
1.	Passing Certificate of Std. 10th	Attested True Copy	
2.	Passing Certificate of Std. 12th / Statement of Marks of Std. 12th	Attested True Copy	
3.	Leaving Certificate	Original	
4.	Certificate of Caste with Category	Attested True Copy	
5.	Non Creamy Layer Certificate	Attested True Copy	
6.	Affidavit for changed Name / Marriage Certificate / Govt. Gazette		
7.	Domicile Certificate	Attested True Copy	
8.	Certificate for Physically Challenged	Attested True Copy	
9.			
10.			

7. OTHER INFORMATION SECTION

Mother Tongue : _____ **Employment Status :** *Employed / Unemployed*

Do you wish to join : NCC / NSS / NUSSD : *Yes / No*

Hobbies and other interests

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 of 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.

Place :

Date :

Signature of Student

9. DECLARATION BY GUARDIAN

I here permitted my son / daughter / ward to join your college. The information supplied by him / her is correct to the best of my knowledge. I have acquainted myself with the rules and fees, dues to my son / daughter / ward and to see that he / she observes :

Place :

Date :

Signature of Guardian

10. FOR COLLEGE / INSTITUTE USE ONLY

Designation	Remarks / Particular / Recommendation	Signature and Date
Admission Clerk		
Admission Committee		
Accountant / Cashier		
Resigtrar / office Superintendent		
Principal / Director		