

## NORTH MAHARASHTRA UNIVERSITY, JALGAON

DEPARTMENT/SCHOOL OF\_\_\_\_\_

Rs. 10/-

## FORM OF APPLICATION FOR ADMISSION TO COURSE

(Semester/Year)

To. FOR OFFICE USE ONLY The Registrar, ADMITTED / NOT ADMITTED North Maharashtra University, Jalgaon. SIGN. OF : \_\_\_\_\_ Director/H.O.D. of Concern Deptt. Sir. 1. I request that, I may be admitted for the "\_\_\_\_\_\_" (Semester/Year) of the North Maharashtra University, Jalgaon. I give an undertaking that, I have not been admitted as a Student for any other Degree or for any other branch of the same Degree in any University. 2. I agree to abide by the Rules and Regulations of the University and undertake that. I shall not do anything that will cause an interference with the discipline of the University. 3. I understand that, if admitted, my admission will be confirmed only on my production of the Transference Certificate from my previous College/Educational Institution and the final Eligibility Certificate from the North Maharashtra University, as the case may be, and if applicable. 4. I am fully aware of the fact that the final degree awarded to me after successful completion of the course shall be that of North Maharashtra University, Jalgaon. 5. I hereby declare that, the information given below is correct to the best of my knowledge and belief. I understand that, in the event of any information being found false or incorrect, my admission shall be liable to be cancelled or rejected. Place : ----Date: / (Signature of the student) Particulars of the Student 1. Name in full: (In Block letters) Surname Name Father's Name Mother's Name 2. Male/Female: 3. Date of Birth: 4. Local Address: 5. Permanent Address: 6. Nationality: \_\_\_\_\_\_ 7. Caste & Category: \_\_\_\_\_ 8. Father's/Guardians Address: \_\_\_\_ - Phone No. \_