

Particulars of the DD : No. _____ Bank Name : _____ Date : _____

Amount Rs. : _____ Receipt No. _____ Date : _____ Sign. : _____

Exam Seat No.

Exam Centre



Tilak Maharashtra Vidyapeeth

(Established under section 3 of UGC Act 1956 vide Notification No. F-9-19/85-U-3 dated 24th April 1987 by the Government of India)

Gultekadi, Pune - 411 037.

ENTRANCE EXAMINATION FORM

Year : 2013- 2014

Photo

Name of the Course : **M.Sc. (Biotech) / BHMCT / B.P.T. / M.B.A. / M.C.A. / B.Ed. / M.Ed. / B.S.W. / M.S.W. / B.Lib & I.Sc. / M.Lib & I.Sc.**

Full Name : _____
(Capital letters) Surname First Name Father's/Husband's Name Mother's Name

Full Name : _____
(In Devnagari) Surname First Name Father's/Husband's Name Mother's Name

Local Address : _____
(Capital letters) _____ Pin : _____

Telephone No. _____ Mobile No. : _____

E-mail Address _____

Date of Birth : D M Y Age : Sex : Male Female Marital Status : Married Unmarried

Qualification : XIIth / XIIth Sc. with PCBE, PCM / % M.A./M.Com./M.Sc. % Any Other : %

B.A./ B.Ed. /B.C.A./ B.Com./B.Sc./G.D. Art / A.T.D. %

Religion Nationality Employed / Unemployed

SC	ST	NT	OBC	OPEN
SBC	VJNT	OTHER		

In the event of any of the above mentioned information being found incorrect or misleading, my candidature shall be liable to cancellation by the Vidyapeeth at any time and I shall not be entitled for refund of any fees paid by me.

Checked by : _____ Date : _____ Candidate's Signature _____

Full Name : _____ Exam Centre : _____

Name of Program : M.Sc. (Biotech) / BHMCT / B.P.T. / M.B.A. / M.C.A. / B.Ed. / M.Ed. / B.S.W. / M.S.W. / B. Lib. / M. Lib.

Sign of /C Adm. Section