



**Dr. D. Y. Patil Unitech Society's  
Dr. D. Y. Patil Science & Computer Science College**




Aakurdi, Pune - 411044

(Affiliated to Savitribai Phule University ID. NO PU/PN/S/44/2000)

Phone:020-27650313, Email:info.scs@dypvp.edu.in

**APPLICATION FORM FOR ADMISSION**

Admission for the Course Year **2022-2023**

<b>Application No :773</b>	<b>Eligibility No :12021009829</b>		   <b>Signature of the Candidate</b>
<b>Candidate's Name :Chirag Dattu Girawale</b>	<b>Mother's Name : Savita</b>		
<b>Category :OPEN</b>	<b>Caste :Maratha</b>		
<b>Religion :Hindu</b>	<b>Date of Birth :05/09/2002</b>	<b>Blood Group :A-</b>	
<b>Place of Birth :Astagaon, Parner</b>	<b>Gender :Male</b>	<b>Organ Donation :No</b>	
<b>Email ID :cgirawale@gmail.com</b>	<b>Marital Status :UnMarried</b>	<b>Mobile No :8605412219</b>	
<b>Nationality :Indian</b>			
<b>Local Address :Amardeep Colony, Rahatani Phata, Pimpri, Pune</b>			
<b>Permanent Address :Amardeep Colony, Rahatani Phata, Pimpri, Pune</b>			
<b>State of Domicile :Maharashtra</b>	<b>Aadhar Card No :773179553267</b>		
<b>Mother Tongue :Marathi</b>	<b>Fees Category :PAYING</b>	<b>EX.ServiceMen :NO</b>	
<b>Phy.Handicaped :No</b>	<b>Rural/Urban :Rural</b>		
<b>INFORMATION OF THE PARENT'S / GUARDIAN</b>			
<b>Parent's Name :Savita Girwale</b>			
<b>Address :Amardeep Colony, Rahatani Phata, Pimpri, Pune</b>			
<b>Cell No :9970512595</b>		<b>Email ID :</b>	
<b>Occupation :Baby seater</b>		<b>Central Govt. Employee :No</b>	
<b>Relation :Son</b>		<b>Annual Income :120000</b>	
<b>SUBJECTS OF CHOICE</b>			
<b>Place :</b> <b>Date :</b>  <div style="display: flex; justify-content: space-between;"> <div> <b>Candidate</b> </div> <div>   <b>Signature of the</b> </div> </div>			



Place :

Date :

Document Verification

Office Superintendent

Principal

**UNDERTAKING BY THE STUDENT**

1. I bind myself to abide by the rules & regulations and the discipline of this college throughout my tenure as a student in the college.
2. I shall accept any deterrent punishment (of monetary or academic nature) that may be decided by the authorities of the college, for any infringement or violation by me, of the discipline and conduct rules of the college.
3. I am also aware of the fact that the practice of "Ragging" in the college or outside the college is totally banned vide "Maharashtra Prohibition of Ragging Act-1990". I have read the extract of "Maharashtra Prohibition of Ragging Act-1990", displayed on the Notice Board. I am aware of the severe punishment that can be imposed if I do not abide by the provisions stipulated in the Act.
4. I am aware that smoking, consuming of "Gutkha" or other tobacco related items or alcohol is prohibited in the college / hostel premises. I will abide by the said rules.
5. I agree to pay the college tuition and other fees on the dates that will be notified by the college and while leaving the college, I will obtain proper clearance and give prior intimation to the college authorities.
6. I hereby agree to submit to the disciplinary jurisdiction of the Vice-Chancellor and other officers of the Savitribai Phule Pune University, and also authorities of college, and shall abide by the Rules and Regulation made by them.
7. I will promptly intimate any change in address of self, parent or local guardian or any other item in the form.

Place :

Date :

Faculty &amp; Class:

Signature of the Student

Name: Chirag Dattu Girawale

I substantiate and accept the aforesaid undertaking made by my ward.

Place :

Date :

Name:

Signature of the Parent/Guardian

**DECLARATION BY THE STUDENT**

I, declare that, I have read all the rules of admission as contained in the prospectus of the college. I undertake and bind myself to these rules. It is only on understanding these rules, I have filled this application form for admission to the degree course in the year

I understand and accept that my admission will be provisional and subject to verification of all documents as mentioned in the prospectus and as required by the Savitribai Phule Pune University, as also to the fulfillment of eligibility conditions laid down by Statutory Bodies. The information given by me in my application is true to the best of my knowledge and belief.

Place :

Date :

Name: Chirag Dattu Girawale

Signature of the Student

**DECLARATION TO BE SIGNED BY THE CANDIDATE'S PARENT / GUARDIAN**

I, declare that.

1. The particulars furnished by my son / daughter / ward in his / her application form are correct to the best of my knowledge and belief.
2. I undertake and bind myself to pay on behalf of my son's / daughter's / ward's tuition fees and other fees, by the due date which the college may levy from time to time and in the event of failure on my part or the part of my son / daughter / ward, the Principal of the college may take such action against my son / daughter / ward, as he or she may deem fit.
3. I substantiate and accept aforesaid declaration made by my ward.

Place :

Date :

Name:

Signature of the Parent/Guardian

**DOCUMENTS CHECK LIST**

Sr No.	Document	Original	Xerox	Signature
1	MarkSheet	<input type="checkbox"/>	<input type="checkbox"/>	
2	L.C /T.C	<input type="checkbox"/>	<input type="checkbox"/>	
3	Migration Certificate (If Applicable)	<input type="checkbox"/>	<input type="checkbox"/>	
4	Gap Certificate (If Applicable)	<input type="checkbox"/>	<input type="checkbox"/>	
5	Domicile Certificate	<input type="checkbox"/>	<input type="checkbox"/>	
6	Caste Certificate (If Applicable)	<input type="checkbox"/>	<input type="checkbox"/>	
7	Non-Creamy Layer (If Applicable)	<input type="checkbox"/>	<input type="checkbox"/>	
8	Minority Certificate (If Applicable)	<input type="checkbox"/>	<input type="checkbox"/>	
9	Eligibility Form	<input type="checkbox"/>	<input type="checkbox"/>	
10	Aadhar Card	<input type="checkbox"/>	<input type="checkbox"/>	

I have not submitted document in the above  
Sr. No:-

only. If I am unable to submit these documents within 15 days from the date of provisional admission, then my admission will be automatically cancelled.

Date :



 Sign

Signature of the Student

Parent's / Guardian's Signature

" मी दिनांक 01/01/\_\_\_\_\_ रोजी 18 वर्षाचा / वर्षाची झालो / झाले आहे किंवा होणार आहे . 18 वर्ष पूर्ण झाल्याबरोबर मी माझे नाव मतदार यादीत नोंदवून घेणार आहे अशी मी प्रतिज्ञा करतो / करते ."



Signature of the Student