
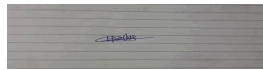
	<b>FERGUSSON COLLEGE(AUTONOMOUS)</b>	<b>Application for Admission to S.Y_M.SC COM APP SEM 3</b>	 
	<b>FERGUSSON COLLEGE RD, SHIVAJINAGAR, PUNE, MAHARASHTRA 411004</b>	<b>Session 2020-2021 Application No. : 674776</b>	

## Applicant's Personal Details

Name of the Student	GODASE	HANUMANT	CHHATRABHUJ GODASE	SHAKUNTALA
	Surname	First name	Father name	Mother's Name

Student Name(HINDI)			
Date of Birth	19/08/1998	Place Of Birth	BHIKAR SAROLA
Birth State	maharashtra	Birth District	osmanabad
Birth Tehsil	osmanabad	Voter Id	
Marital Status	UNMARRIED	Blood Group	O+
Religion	HINDU	Gender	MALE
Nationality	INDIAN	Aadhar card Number	253984323678
Mother Tongue	MARATHI	Passport Number	
EID Number		Employment Status	Unemployed
NCC/NSS	NO	Eligibility No.	
Caste Category	OPEN	Sub Caste	Hindu
Enrollment Number		PRN Number	1910246503
Handicap		Is Orphan	NO
Saral No.		Udise No.	
Scholarship	No Scholarship Required		

Father's/Husband's Name	CHHATRABHUJ GODASE		
Occupation	FARMER	Gross Annual Income	50,000
Mobile	8975096078		
Office Address			

Address of Correspondence			
Address	bhikar sarola at post palsap tq and dist osmanabad		
State	Maharashtra	District	Osmanabad
Tehsil	OSMANABAD	City/Town/Village	Osmanabad
Pincode	413509		

Permanent/Native Address			
Address	bhikar sarola at post palsap tq and dist osmanabad		
State	Maharashtra	District	Osmanabad
Tehsil	OSMANABAD	City/Town/Village	Osmanabad
Pincode	413509		

**Contact Details**

<b>Student Phone</b>	9834380964	<b>Parent Phone</b>	
<b>Mobile</b>	7066041034		
<b>Email Id</b>	godasehamu123@gmail.com		
<b>Payment mode</b>	Please pay at college counter		

**Last Exam Details**

<b>Exam Name</b>	<b>Name of Board/University</b>		
<b>Month</b>		<b>Year</b>	
<b>Roll Number</b>		<b>Division</b>	
<b>Marks Obtained</b>		<b>Maximum Marks</b>	
<b>Percentage</b>		<b>Result</b>	

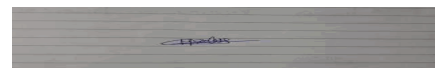
**Exam Details**

<b>Sr.No.</b>	<b>Course Name</b>	<b>SGPA</b>	<b>CGPA</b>
0			

<b>Sr.No.</b>	<b>Subject Name</b>	<b>Subject Type</b>
<b>Group Name :</b>		
1	Cyber Security - III	COMPULSORY
2	Skill Development - III	COMPULSORY
3	ADVANCED JAVA	COMPULSORY
4	SOFTWARE ENGINEERING AND UML	COMPULSORY
5	ADVANCED WEB TECHNOLOGIES	COMPULSORY
6	MOBILE TECHNOLOGY	COMPULSORY
7	FULL STACK	COMPULSORY
8	PROJECT	COMPULSORY

**Declaration by Student**

I hereby declare that, I have read the rules related 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 the form signed by me and I undertake that, in absence of any document the final admission will not be granted and / or admission will stand cancel.



Date : 30/10/2020

Signature of the Student

**Declaration by Guardian / Parent**

I have 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 see that he / she observes.

Date : 30/10/2020

Signature of the Guardian/Parent

For College / Institute Use Only		
Designation	Remarks / Particulars /Recommendations	Signature and Date
Admission Clerk		
Admission Committee		
Accountant / cashier		
Registrar/Office superintendent		

#### REMARK OF THE ADMISSION COMMITTEE

May be admitted to Class \_\_\_\_\_ Section \_\_\_\_\_

May be Rejected \_\_\_\_\_

Last date of payment of fees \_\_\_\_\_

Admission may be canceled if the fees are not paid by this date.

Principal

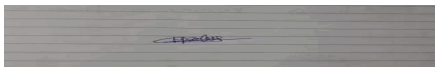
Signature of Admission Committee

#### Other Details

#### Undertaking

I HANUMANT CHHATRABHUJ GODASE , the undersigned was a student of Fergusson College Autonomous in the year (mention your last academic year in Fergusson College)\_\_\_\_\_ and now seeking admission for the academic year 2020-2021 for the course (mention course and year) S.Y M.SC COM APP SEM 3. I understand that under the current circumstances of COVID-19, I will be admitted to the next academic year with the condition that I shall clear all my backlogs (which in normal circumstances would have made me ineligible for the said admission) before commencement of the next semester. I am aware that if I fail to do so, my admission stands invalid/cancelled and I will not hold the college responsible for the consequences of the same.

Signature and Full name of the Student:



HANUMANT CHHATRABHUJ GODASE

Date : 30/10/2020

Place :