

- N. B.**—1. No student will be allowed to appear for the Post-Graduate Examination unless he has taken his Bachelor's Degree at a Convocation.
- Persons who are graduates of other Universities have to provide themselves with Certificate of Eligibility from this University before applying for Registration as Post-Graduate students.
  - Students applying for admission should remit Rs. 50/- as Admission Fee along with the Form. This admission fee shall, on no account, be refunded.
  - Acceptance of admission fee does not mean that the student is admitted to the Course.
  - Students should not attach the original certificates to the admission forms. They should attach only certified true copies of the certificates. They should produce the original certificates personally only when finally admitted and under no circumstances they should leave the original certificates in the Office.

**UNIVERSITY OF POONA**

**FORM OF APPLICATION FOR ADMISSION AS A POST-GRADUATE STUDENT FOR  
Master of Science  
(PARTLY BY PAPERS AND PARTLY BY RESEARCH) COURSE**

TO  
THE REGISTRAR, UNIVERSITY OF POONA,  
PUNE-7.

Sir,  
I request that I may be admitted as a Post-Graduate student to study for the M.Sc. (Partly by Papers and Partly by Research) Course of the University of Poona. I have not been admitted as a student for any other Degree or for any other branch of the same Degree.

I shall not request for any special concession such as a change in time or day fixed for the University Examination etc. on the religious or any other ground.

**DECLARATION**

I hereby submit to the disciplinary jurisdiction of the Vice-Chancellor and the other officers and authorities of the University / and the authorities of the College and Institution, and shall observe and abide by the rules made by the Vice-Chancellor in that behalf, / and also by the rules made by the Principal of the College / Head of the Institution.

"I hereby undertake to obtain my Degree ( Graduation ) Certificate at the Convocation before I am due to appear for the Post-Graduate Examination. I will produce my Degree Certificate together with a copy thereof in the University / College / Institution Office, at the time of submitting the application for admission to the Post-Graduate Examination. I am aware that I will not be allowed to appear for the Examination, if I fail to obtain and produce my Degree Certificate."

Yours faithfully,

Place : \_\_\_\_\_

Date : \_\_\_\_\_

\_\_\_\_\_  
(Signature of the Student)

**PARTICULARS OF THE STUDENT**

- |  | Surname                                   | Name | Father's/Husband's name |
|--|---|------|-------------------------|
| 1. Name in full in Capital Letters }<br>( In Devnagari )                         | _____                                     |      |                         |
| 2. Address in Poona :  | _____                                     |      |                         |
| 3. Permanent Address :   | _____                                     |      |                         |
| 4. Religion :  | 5. Backward or Non-backward :             |      | _____                   |
| 6. Nationality :   | 7. Male or Female :                       |      | _____                   |
| 8. Date of Birth :   | _____                                     |      |                         |
| 9. Particulars of Bachelor's Degree :  | _____                                     |      |                         |
| ( i ) University _____   | ( ii ) Examination _____                  |      | _____                   |
| ( iii ) Subjects Offered ( Principal ) _____                                     | ( Subordinate ) 1. _____                  |      | 2. _____                |
| ( iv ) Date of Passing : _____   | ( v ) Seat No. at the Examination : _____ |      |                         |
| ( vi ) Class Obtained : _____  | _____                                     |      |                         |
| ( vii ) Name of the College/University ;<br>from which the student graduated } : | _____                                     |      |                         |

10. (a) Date of application for certificate of Eligibility : \_\_\_\_\_  
 (b) No. and Date of provisional certificate issued : \_\_\_\_\_
11. (a) Subject of Research : \_\_\_\_\_  
 (b) Topic of Research : \_\_\_\_\_
12. (a) Name of the recognised Post-Graduate teacher under whom the applicant proposes to do research work } \_\_\_\_\_  
 (b) Signature of the recognised teacher indicating his consent } \_\_\_\_\_
13. (a) Name of the Recognised Institution/Post-Graduate Centre/University Department in which the applicant desires to work } \_\_\_\_\_  
 (b) Signature of the Head of the Recognised Institute : \_\_\_\_\_

**\*EMPLOYMENT CERTIFICATE**

( To be filled in by the Issuing Authority )

I hereby certify that Shri / Smt. \_\_\_\_\_

has been in my paid full time employment as a \_\_\_\_\_ in the grade of Rs. \_\_\_\_\_

from Date \_\_\_\_\_ Month \_\_\_\_\_ Year \_\_\_\_\_ to this day and he / she will till he / she completes his / her thesis for the M.Sc. ( Partly by Papers and Partly by Research ) Course.

Place : \_\_\_\_\_ Signature : \_\_\_\_\_

Date : \_\_\_\_\_ Designation : \_\_\_\_\_

( Stamp or Seal of the Issuing Authority )

[ Note : —This certificate is liable to be verified. In the event of any doubt arising as to the bonafide nature of this certificate, the University has the right to reject the certificate. ]

\* Strike out which is not applicable.                      + Mention the status of the employee.

( To be filled in by the Head of the University Department )

( 1 ) The student should be admitted at the \_\_\_\_\_ Centre.

( 2 ) The student should not be admitted, \_\_\_\_\_  
 ( Signature )

Date : \_\_\_\_\_ Head of the University Department of \_\_\_\_\_

( To be filled in by the Chairman of the Board of Studies )

The following papers are assigned to the student :—

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

Place : \_\_\_\_\_ Signature of the Chairman of the  
 Board of Studies in \_\_\_\_\_

UNIVERSITY OF POONA

**M. Sc. (Partly by Papers & Partly by Research)**

( Examination Admlssion Fee Rs. 200/- )

To  
THE REGISTRAR, UNIVERSITY OF POONA,  
Sir,

I offer myself as a candidate for the Degree of M.Sc. (Partly by Papers and Partly by Research) in the Faculty of Science in the Subject \_\_\_\_\_

I submit herewith four type-written copies of the synopsis of my thesis embodying the results of my research on \_\_\_\_\_

† \_\_\_\_\_

For the thesis which I am submitting, no degree or diploma or distinction has been conferred on me before, either in this or in any other University. Further the material included in thesis has not been published by me before the date of registration for the M.Sc. (Partly by Papers and Partly by Research).

The fee of Rs. 200/- is being remitted separately / is sent herewith.

Yours faithfully,

Date \_\_\_\_\_ Signature \_\_\_\_\_

Name in full in capital letters  
(beginning with surname) \_\_\_\_\_

( Also in Devanagari Script ) \_\_\_\_\_

Sex \_\_\_\_\_ Race and Religion \_\_\_\_\_

Number and Date of Registration \_\_\_\_\_

Date of passing the B. Sc. Examination, Class obtained, optional subjects offered and the name of the University.	}	Date _____
		Class _____
		Subjects _____
		University _____

Date of taking the B.Sc. degree \_\_\_\_\_

Residential address } \_\_\_\_\_  
\_\_\_\_\_

† Please enter in detail the title and the subject of the thesis.

**Certificate of guiding teacher to be submitted by the candidate**

I certify that the thesis presented by \_\_  
 represents his/her original work which was carried out by him/her at \_\_\_\_\_  
 under my guidance and supervision during the period 19 \_\_\_\_ to 19 \_\_\_\_ .  
 I further certify that the foregoing statements made by him/her in regard to his/her thesis are correct.

\_\_\_\_\_  
 Signature of the guiding teacher under  
 whom the candidate has worked.

Place

Date \_\_\_\_ 19 \_\_\_\_ .

Countersignature \_\_\_\_\_

Place

Head \_\_\_\_\_ Uni. Dept. \_\_\_\_\_

Date \_\_\_\_ 19 \_\_\_\_ .

Principal, \_\_\_\_\_ College (P. G. Centre) \_\_\_\_\_

Director, \_\_\_\_\_ Institute. \_\_\_\_\_

Checked,

Asstt. Registrar,  
( Academic ).