



D. Y. PATIL EDUCATION SOCIETY, KOLHAPUR

(Institution Deemed to be University)

(Deemed to be University Declared u/s 3 of the UGC Act 1956 vide Notification No. F.9-26/2004-U.3 dt. 01-09-2005 of the GOI)

869, 'E', D. Y. Patil Vidyanagar, Kolhapur-416 006

Tel 0231- 2601235/36,2601595,2601699, Fax :0231- 2601595

Web : www.dypatilunikop.org E-mail : info@dypatilunikop.org

Form No. :

Affix latest
passport size
photograph

Application for admission to (Please ✓)

Dialysis Assistant Certificate Course.	
Medical Social Coordinator Course.	
Operation Theater (OT) Technician Certificate Course.	
B.Sc. DMLT Course.	
Emergency Medical Technician (EMT) Certificate Course.	

1. Candidate's name (As given in class S.S.C. or HSC or Degree Certificate)

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2. Sex :

M	F
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M

F

3. Date of Birth

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D

D

M

M

Y

Y

Y

Y

Candidate's Signature

4. Address for Communication

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.....

.....

.....

.....

Pin

.....

Permanent Address

.....

.....

Tel (with STD code).....Pin

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Tel. (with STD code)

Mobile

Note : For communication
Purpose it is necessary to
give

PIN/ Tel & Mobile Nos.

6. Academic Performance

Qualification	Name of the School /college/institute	Board/ University	Year of Passing	Percentage Of Marks
10 th				
12 th				
BA/B.Com/B.Sc				
BA/B.Com/B.Sc				
BA/B.Com/B.Sc				

<p>Declaration – I</p> <p>1. I hereby declare that the above information is true and complete to the best of my knowledge. I am aware that if any information herein is found to be incorrect or incomplete, my application form will be rejected/admission will be cancelled</p> <p>2. If admitted I shall abide by the rules and regulations of D.Y.Patil Education Society Deemed University, Kolhapur</p> <p style="text-align: right;">Student's Signature</p>	<p>Declaration – II</p> <p>1. I, the parent/guardian of the applicant hereby declare that I am aware of the financial obligations of admitting my child/ward to this University. I agree to pay the tuition and other fees payable to the institution as fixed by D.Y.Patil Education Society Deemed University, Kolhapur. I also affirm the declaration made by my child/ward.</p> <p>a) Name : b) Relation with the candidate :</p> <p style="text-align: right;">Parent's Signature</p>
<p>Place : _____ Date : / /</p>	
<p>Note: Application should be accompanied by attested copies of following certificates</p> <ol style="list-style-type: none"> 1. 10th Passing Certificate and Statement of Marks. 2. 12th Passing Certificate and Statement of Marks. 3. Passport size recent photographs – 2 4. Leaving Certificate. 5. Medical fitness certificate from a registered medical practitioner. 6. Character Certificate form Principal/Head Master. 7. BA/B.Com/B.Sc. Ist Year Statement of Marks. 8. BA/B.Com/B.Sc. IInd Year Statement of Marks. 9. BA/B.Com/B.Sc. IIIrd Year Statement of Marks. 10. BA/B.Com/B.Sc. Degree Certificate. 	