

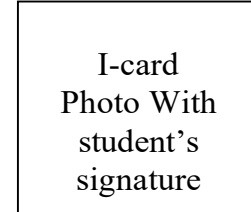


**D.Y. PATIL EDUCATION SOCIETY
DEEMED TO BE UNIVERSITY, KOLHAPUR
(Allied Health Science) EXAMINATION FORM**

FOR OFFICE USE ONLY

Exam Code:..... Exam Month & Year:..... Fees Rs.:..... Receipt No:.....

The Controller of Examinations,
D. Y. Patil Education Society
Deemed to be University
Kolhapur – 416 006.



Form – IV

Sir,

I request permission to present myself at the University Examination:

Month/Year: -...../..... Exam Name..... Exam Code.....

PRN..... Name.....

(name exactly as it appears on 12th or Equivalent Certificate. Any change is to be supported by applicable certificate/gazette notification/affidavit)

Gender: M/ F Aadhaar No. (optional):.....

Father's Name:.....

Mother's Name:.....

Permanent Address:.....

..... Pin:.....

Present Address :.....

..... Pin :.....

Tel. No.: (.....) Mobile No:.....

E-mail address:.....

I am appearing for the papers below for 1st Time Repeater

(Write) Name of the subject and **the subject code in bracket:**

Repeater Student shall mention Theory or Practical as the case may be, against each Subject.

Semester –

Semester –

(01)(.....) (06).....(.....)

(02)(.....) (07).....(.....)

(03)(.....) (08)(.....)

(04)(.....) (09)(.....)

If Repeater, Name of the **EXEMPTED SUBJECT (Previously Passed Subject)** and subject code: **(Theory or Practical)**

- (01).....(.....) (06) (.....)
- (02).....(.....) (07) (.....)
- (03).....(.....) (08).....(.....)
- (04).....(.....) (09).....(.....)
- (05).....(.....) (10).....(.....)

DECLARATION

- 4. I hereby declare that I have not taken any attempt (including the present one) in excess of the maximum attempts permissible by Statutory bodies/University for the said examination.
- 5. I hereby declare that I have gone through the syllabus prescribed and relevant rules.
- 6. I shall be responsible if my application form is rejected for any error, wrong or incomplete entries made by me in the examination form.

Date: -

Place: - Kolhapur

Signature of the Candidate

CERTIFICATE TO BE SIGNED BY THE HEAD OF THE INSTITUTION

**I certify that, Shri /Smt/ Kum.....
is a bonafide student of this college and has satisfactorily attended the classes and that.**

- 3. His / Her attendance is not less than 75% in lecture teaching and not less than 80% in practical work.
- 4. That the candidate has completed the academic terms and appeared in mandatory number of internal assessment tests as per the University rules and has secured minimum marks in the same.

Particulars of enclosures attached,

Photo copy of mark statement of latest examination.

Date.....

Signature & seal of the Dean / Principal

Name of the College: