



SHIVAJI UNIVERSITY, KOLHAPUR - 416 004 MAHARASHTRA

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शिवाजी विद्यापीठ, कोल्हापूर - ४१६ ००४ - महाराष्ट्र

दूरध्वनी: (ईपीएबीएक्स) २६०९०० सांख्यिकी कक्ष : ०२३१-२६०९१४७.

फॅक्स : ००९१-२३१-२६९३२९४ E-Mail : statcell@unishivaji.ac.in

जा.क्र./शिवाजी वि./सांख्यिकी कक्ष/विद्यार्थी माहिती/२०१९-२०/

दिनांक :

25 SEP 2019

No 0858 -

प्रति,

१. मा. अधिविभागाप्रमुख,

सर्व अधिविभाग,

शिवाजी विद्यापीठ, कोल्हापूर.

२. मा. प्राचार्य/संचालक,

सर्व संलग्नीत महाविद्यालये/मान्यताप्राप्त शैक्षणिक संस्था.

विषय : आपल्या अधिपत्याखालील शासकीय, अशासकीय अनुदानित व कायम विना/अनुदानित महाविद्यालयातील/अधिविभागातील प्रवेशित विद्यार्थी संख्येची प्रवर्गनिहाय माहिती सादर करणेबाबत.

संदर्भ : १. जा.क्र विशेष कक्ष/ ३२५ दिनांक-१३ जून, २०१९ रोजीचे पत्र.

२. जा.क्र विशेष कक्ष/ ३७१ दिनांक-३१ ऑगस्ट, २०१९ रोजीचे पत्र.

महोदय/महोदया,

उपरोक्त विषय संदर्भाकित पत्रास अनुसरून आपणास कळविण्यात येते की, आपल्या अधिपत्याखालील शासकीय, अशासकीय अनुदानित व कायम विनाअनुदानित महाविद्यालयाची/ अधिविभागाची शैक्षणिक वर्ष २०१९-२० मधील प्रवेशित विद्यार्थीसंख्येची प्रवर्गनिहाय माहिती पत्रा सोबत जोडलेल्या विवरणपत्रामध्ये तात्काळ पाठवून द्यावी. आपल्या महाविद्यालय/अधिविभागच्या unishivaji.ac.in च्या ई-मेल आयडीवर परिपत्रक व विवरण पत्र पाठविले असून सदरच्या विवरण पत्राप्रमाणे आपल्या महाविद्यालयातील/अधिविभागतील शैक्षणिक वर्षे २०१९-२० मध्ये प्रवेशित विद्यार्थी संख्येची माहिती तात्काळ सादर करावी. तसेच सदरची माहिती हार्ड/सॉफ्ट कॉपीमध्ये सांख्यिकी कक्षाकडे पाठवून द्यावी. ही विनंती.

कळावे.

आपला विश्वासू,

उपकुलसचिव

Name of College/Department:-

AISHE ID(Only for College/Institute):-

Sr. No.	Level (UG/PG/Diploma/Certificate/ Integrated/PG-Diploma)	Course Name (e.g. B.A. , B.Com., B.Sc. etc.)	Course Duration	First Year approved Intake Capacity (eg. 20/30/40/50 /60/80/120 not more than 120)	No. of Divisions	
					Granted	Non – Granted

Note: Please don't provide all division or all parts intake together. Just provide approved one division intake for first year so that based on duration of course and number of divisions total intake will get calculated.

NAME OF THE COLLEGE / DEPARTMENT: -

2019-2020

M: Male F: Female

Sr. No	Name of the Course/Faculty	Intake Capacity	Status	SC		ST		VJA		NTB		NTC		NTD		OBC		SEBC		EWS		OPEN		Total	
				M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
1.	ARTS, SOCIAL SCIENCES & FINE ARTS																								
	B.A. I		Applied																						
			Admitted																						
	B.A. II		Admitted																						
	B.A. III		Admitted																						
				Total																					
	M.A.I		Applied																						
			Admitted																						
	M.A.II		Admitted																						
				Total																					
	M.Phil.		Applied																						
			Admitted																						
	Ph.D.		Applied																						
			Admitted																						
			Total																						
2.	COMMERCE																								
	B.Com. I		Applied																						
			Admitted																						
	B.Com. II		Admitted																						
	B.Com. III		Admitted																						
				Total																					
	M.Com.I		Applied																						
			Admitted																						
	M.Com.II		Admitted																						
				Total																					
	M.Phil.		Applied																						
			Admitted																						
	Ph.D.		Applied																						
			Admitted																						
			Total																						

While filling the admission proforma, it should be noted that the reservation of SBC candidates should be shown in the OBC column. As such the reservation figure of SBC candidates should add to that effect.

Sr. No	Name of the Course/Faculty	Intake Capacity	Status	SC		ST		VJA		NTB		NTC		NTD		OBC		SEBC		EWS		OPEN		Total		
				M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
	M.Phil.		Applied																							
			Admitted																							
	Ph.D.		Applied																							
			Admitted																							
	Total																									
9.	PHARMACY etc.																									
	B.Pharm. I		Applied																							
			Admitted																							
	B.Pharm. II		Admitted																							
	B.Pharm. III		Admitted																							
	B.Pharm. IV		Admitted																							
Total																										
	M.Pharm. I		Applied																							
			Admitted																							
	M.Pharm.II		Admitted																							
Total																										
	M.Phil.		Applied																							
			Admitted																							
	Ph.D.		Applied																							
			Admitted																							
Total																										
10.	OTHER COURSE IF ANY																									
			Applied																							
			Admitted																							
			Admitted																							
			Admitted																							
Total																										
11.	CERTIFICATE / DIPLOMA COURSES																									
			Applied																							
			Admitted																							
Total																										

PRINCIPAL / DIRECTOR/ HEAD OF DEPT.

Minority Students Information

2019-2020

College/Department Name: -----

Sr. No	Name of the Course/Faculty	Part	Muslim		Jain		Christian		Sikh		Navboudh		Parshi		Total	
			M	F	M	F	M	F	M	F	M	F	M	F	M	F
1.																
2.																
3.																
4.																
5.																

PRINICIPAL / DIRECTOR/ HEAD OF DEPT.

Physically Handicapped Student Information

2019-2020

College/Department Name: -----

Sr. No	Name of the Course	Part	Blind		Hearing Disabled		Ortho Impaired		Mental Impaired		Any other please specify		Total	
			M	F	M	F	M	F	M	F	M	F	M	F
1.														
2.														
3.														
4.														
5.														

PRINCIPAL / DIRECTOR/ HEAD OF DEPT.

Foreign Students Information 2019-2020

College/Department Name: -----

B1 : Foreign Students

Sr.No.	Country Name	Name of the Course	Part	Male	Female	Total

In case if no Foreign Students are enrolled nil report is to be sent.

Other State / Other University Students Information 2019-2020

Other state students (Course wise)

Sr.No.	State Name	Name of the Course	Part	Male	Female	Total
1.						
2.						
3.						
4.						
5.						

Other University Students

Sr.No.	Other University Name	Name of the Course	Part	Male	Female	Total
1.						
2.						
3.						
4.						
5.						

In case if no other state or other University Students are enrolled nil report is to be sent.

PRINCIPAL / DIRECTOR/ HEAD OF DEPT.

HOSTEL ADMISSION PROFORMA

2019-2020

College/Department Name: -----

Name of the Hostel	Hostel Intake Capacity	Status	SC		ST		VJA		NTB		NTC		NTD		OBC		SEBC		EWS		OPEN		Total	
			M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
		Applied																						
		Admitted																						

In case the Hostel Accommodation is not available nil report is to be sent.

If applications of B.C. Candidates are rejected then state the reasons thereof.

PRINCIPAL / DIRECTOR/ HEAD OF DEPT.