

SHIVAJI UNIVERSITY, KOLHAPUR

Application for admission to Dual Degree programme.

(As Student of Centre for Distance Education with reference to provisions of Ordinance 78 of MUA-1994.)

The Registrar,					
Shivaji University,					
Kolhapur-416 004					
Si	ub: - Registration under Dua	l Degree programme.			
Sir,					
I hereby submit my	y application for registration to	Dual Degree programme.			
1. I have already taken a	dmission to regular	Course Part			
as a Regular studer	it in	College /University			
Department	for the academic year.				
2. I wish to take admi	ssion as a Student of Centre	e for Distance Education for course			
Part	as provided under C	0.78 for the examinations to be held for			
academic year 2016-1	.7				
I hereby assure th	at I have gone through the r	rules and regulations prescribed under			
ordinance 78 which are b	inding upon me. I declare that	the information submitted in this form			
is correct to the best of m	y knowledge.				
Thanking you,					
Date:		Yours faithfully,			
Place:					
		Signature of the applicant			
Encl:-					
i Duly filled in An	oliantian Form				

- - Duly filled in Application Form.
 - Statement of marks of qualifying examination. ii.
 - Statement of marks of all examinations and degrees obtained ie. B.A, B.Com., B.Sc., iii. M.A., M.Com., M.Sc., B.Ed. etc.)
 - Demand Draft or Challan (i.e. Receipt of fees remitted at Shivaji University office) iv. of Rs.1000/-.



Application for-Dual Degree Registration

 College/University: Regular Course for which admission is taken: 						Identity size B/W Photograph		
2. Regular Course for w	men admission	is taken:			-			
3. a) Name of the Applic	cant in Capital	letters in En	glish (Be	ginning v	vith Surna	me)		
b) Name in Marathi:								
4. Postal Address for Co	orresnondence							
4. I ostai Audiess for Co	respondence							
5. Telephone No.		Mobile No.						
	Day	Mont	h	Year				
6. Date of Birth					7. Sex :	M/F		
8. Class to which admiss	sion			Sub	ject	Part	 t	
Under Distance mode	e for Degree is r	equested						
9. Qualifying Examinati	ion Passed:							
i) College:								
ii) Board/University:								
iii) Seat No	Year							
CERTIFIC	CATE OF THE	PRINCIPAI	/HFAD	IINIVEE	PSITV DEI	PARTME	NT	
Shri/Smt								
college for the academic		_				_ 1		
The original doc	uments produce	ed by him/hei	& the in	nformatic	on furnished	d above by	y the student are	
correct to the best of r	-	•				•		
programme.								
Dlagge				Seal &	Name Sign	nature of	Principal /	
Place:- Date			Head, University Department					