Examination From for M.A.

Rs.10/-

Form No.	SWAMI RAMANAND TEERTH MARATHWADA UNIVERSITY, NANDED Application Form for MA _____ Examination to be held in March/April-Oct./Nov.2011-2012 (For External Candidates)	Subject _____ M.A. 1st yr (____ Sem) M.A. 2nd yr (____ Sem)

IMPORTANT INSTRUCTIONS : ❑ This form will be Computer sacnned ❑ Please fill the form neatly with DARK BLACK PEN in CAPITAL LETTERS only ❑Do not use RED PEN ❑Do not use photocopy of this form ❑Do not fold this form ❑Do not make any stray marks on the form.

2. NAME OF THE COLLEGE

3. COLLEFE CODE

4. ELIGIBILITY NUMBER

5. SURNAME

NAME

FATHER/ HUSBAND'S NAME

MOTHER'S NAME

6. COMPLETE POSTAL ADRESS OF THE CANDIDATE

_____

_____

_____ PIN

STD CODE   PHONE NUMBER / MOBILE NUMBER

7. PHYSICALLY HANDICAPPED
1= Yes
2= No

8. BLIND
1= Yes
2= No

9. Caste
1= SC 4 = NT2 7 = OBC
2= ST 5 = NT3 8 = SBC
3 = NT1 6 = VJ 9 = OTHER

10. Sex
1= Male
2= Female

11. DETAILS OF PREVIOUS EXAMINATION

Name of the Exam	Seat Number	Month & Year	College	University	Result

Important : Attested xerox coppy of the statement of marks must be submitted in support of column No.11

12. APPEARING SUBJECTS (Paperwise codes of appearing Subjects) : _____

Subject	Subject Code	Subject	Subject Code
1.		9.	
2.		10.	
3		11.	
4.		12.	
5.		13.	
6.		14.	
7.		15.	
8.		16.	