



S.N.D.T Arts and Commerce College for Women

Estb. : 5 July 1916

Constituent College of S.N.D.T Women's University Mumbai

Maharshi Karve Vidya Vihar, Karve Road, Pune – 411 038.

Phone : 020-25431153 * E-Mail: sndtartspune@gmail.com * Website: www.sndtartarts.ac.in

Provisional Admission from 2025-26

Student Name: -----

Father Name: -----

Admission Requirement faculty:

| | | | | | |
|-----|-------|------------|-------|-------|-------|
| B.A | B.COM | B.A. Music | B.V.A | B.A.F | B.C.A |
| | | | | | |

Medium: English /Marathi

ABC ID/ APAAR
ID No:

| | | | | | | | | | | | | | | | | | | | |
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Student Mobile No:

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| | | | | | | | | | | | | | | | | | | | |

Parents Mobile No:

Student Email Id: -----

Category: Open / SC / ST / OBC / VJ -A / NT-B / NT-C / NT-D / SBC

12th Marks:

12th Percentage:

Course Total fee:

Admission Procedure Done: Yes/ No

Major Subject: 1) ----- 2) ----- 3) -----

It is my responsibility to fill and submit the online form in the office with all necessary Documents and Undertakings.

Date: / /202

Student Signature

Admission Committee

Administration Dept.

Principal





Application for Admission to The S.N.D.T. Women's University's Department/Institute/Conducted & Affiliated Colleges

College Code:

Please paste a passport size (35 mm X 45 mm) Photograph here, Do NOT staple. Photo should not exceed the borders.

For college use only →

Course Admitted to:

Division:

Form No:

Admission date: / /

Roll No:

Kindly read important notes before filling-in form:

1. Use black ink to fill in the form and Do NOT overwrite. 2. Fill in all fields in CAPITAL letters only. 3. Strike-off whichever is NOT applicable.

Course applied for:

Course Part or Semester applied for (e.g. 1/2/3/4):

↑ Student should sign strictly inside this box only with black ink

Applying for Concession EBC / SC / ST / NT / OBC / SBC / PTC / STC / Ward of Freedom Fighter / Ward of Ex Service Man :

Admitted against which Category : Open / Reserved

If Reserved, Specify:

1. Personal Information Section

| | Last Name | First Name | Middle Name |
|-----------------------------------------------------------------------|-----------|------------|-------------|
| Name of the Student: (In case of changed name, write current name) | | | |
| Name of the Student: (In Devanagari) | | | |
| Name of the Student as printed on Std. X Passing Certificate | | | |
| Father's/Husband's Name: | | | |
| Mother's Name: | | | |
| Previous name of the Student: (In case of changed name) | | | |

Reason for name change: Willingly / After Marriage

Marital Status: Unmarried / Married/Divorced/ Widowed

Previous SNDT WU Enrolment Number:

Date of Birth (DD/MM/YYYY): / /

Place of Birth:

Blood Group (with Rh):

Religion:

Citizen of (country name):

Student's location Category: Rural/ Urban/ Tribal

Address for Correspondence

| | | | |
|------------------------------------------------|-----------|---------|--------------------------------|
| State: | District: | Tehsil: | City/Town/Village: |
| Address (House no, street/area/suburb etc.) | | | PIN Code: <input type="text"/> |

Permanent Address [Write only if different than 'Address for Correspondence']

| | | | |
|------------------------------------------------|-----------|---------|--------------------------------|
| State: | District: | Tehsil: | City/Town/Village: |
| Address (House no, street/area/suburb etc.) | | | PIN Code: <input type="text"/> |

Contact Details

| | |
|--------------------------------|--------------------------------|
| Phone # 1: STD Code: Phone No: | Phone # 2: STD Code: Phone No: |
| Mobile number: | Email ID: |

2. Legal Reservation Information Section

| | | |
|--------------------|---------------------------|---------------------------------------------------------------------------------------------------------------------------|
| Domicile of State: | Category: Open / Reserved | If Reserved: SC / ST / DT(A) / NT(B) / NT(C) / NT(D) / OBC / SBC |
| Caste: | Sub-Caste: | If Physically Challenged: Visually Impaired / Speech and/or Hearing Impaired / Orthopedically Impaired/ Learning Disabled |

3. Social Reservation Information Section [Check (√) whichever is applicable, write name of supporting document attached, in section 7.]

| | |
|---------------------------------------------|------------------------------------------|
| Ex-Serviceman/Ward of Ex-Serviceman | Member of Project Affected Family |
| Active-Serviceman/Ward of Active-Serviceman | Member of Earthquake Affected Family |
| Freedom Fighter/Ward of Freedom Fighter | Member of Flood / Famine Affected Family |
| Ward of Primary School Teacher | Resident of Tribal Area |
| Ward of Secondary School Teacher | Kashmir Migrant |
| Deserted/Divorced/Widowed Women | |

Please Turn Over...



Form No:

4. Guardian Information Section

Occupation of the Guardian: Service / Business / Profession / Farmer / Laborer / Retired

Annual Income of the Guardian (Rs.):
(last financial year)

Relationship of guardian with applicant:

Phone No.:

5. Educational Details Section

Last Qualifying Exam Details: (In case of Degree mention major & subsidiary subjects)

Name of Last Qualifying Examination:

| Name of Board/University & School /College | Subjects Studied | Date of Passing (DD/MM/YYYY) | Examination Seat No. (Last) | Degree / Passing Certificate No. | Grade / Total Marks Obtained | Out of |
|--------------------------------------------|------------------|------------------------------|-----------------------------|----------------------------------|------------------------------|--------|
| | | | | | | |
| | | | | | | |
| | | | | | | |

6. Selected Subjects

Please attach separate sheet giving subjects opted for.

7. Attached Documents and Certificates Section

| Sr. No. | Name of Document/Certificate | Original / Attested True Copy | Attached (Yes/No) |
|---------|----------------------------------------------------------------------------------|--------------------------------|-------------------|
| 1 | Passing Certificate of Std. X | Attested True Copy (Mandatory) | |
| 2 | Passing Certificate of last qualifying examination | Attested True Copy | |
| 3 | Leaving Certificate | Original | |
| 4 | Certificate of Caste with Category (if applicable) | Attested True Copy | |
| 5 | Non Creamy Layer Certificate (if applicable) | Attested True Copy | |
| 6 | Affidavit for changed name/ Marriage Certificate / Govt. Gazette (if applicable) | Attested True Copy/Original | |
| 7 | Domicile Certificate (if applicable) | Attested True Copy | |
| 8 | Certificate for Physically Challenged (if applicable) | Attested True Copy | |
| 9 | Certificate for Social Reservation (if applicable) | Attested True Copy | |

8. Other Information Section

Mother Tongue:

Employment Status: Employed / Unemployed

Do you wish to join NCC / NSS :
Yes / No

Would you like to apply for Hostel: Yes / No

Hobbies, Proficiency and Other Interests:

Games and Sports participation:

Level (e.g. college/state/national/international etc.):

Personal Identification Marks:

1.

2.

9. Declaration by Student

I hereby declare that, I have read the rules related to admission and the information filled in by me in this form is accurate and true to the best of my knowledge. I will be responsible for any discrepancy arising out of the form signed by me and I undertake that, in absence of any document, the final admission will not be granted and/or admission will stand cancelled. I am aware of the Maharashtra Prohibition of Ragging Act, 1999, and I state that I will abide by all the rules and regulations of the said Act.

Place:

Date:

Signature of the student:

10. Declaration by Guardian

I have permitted my daughter/son/ward to join your college. The information supplied by her/him is correct to the best of my knowledge. I have acquainted myself with the fees, dues and rules applicable to my daughter/son/ward and to see that she/he observes them.

Place:

Date:

Signature of the Guardian:

11. For College/Institute Use Only

| Designation | Remarks / Particulars / Recommendations | Signature and date |
|-------------------------|------------------------------------------------|--------------------|
| Admission Clerk | | |
| Admission Committee | | |
| Accountant/Cashier | Cash Received: Rs. _____ Receipt No.: _____ | |
| Registrar/Office Supdt. | | |
| Principal/Director | | |

Note: Student MUST retain photocopy of completely filled in admission form (both pages) for future reference. Available information in this form will be required to activate his/her account on Digital University Portal.

