Terna Public Charitable Trust's

COLLEGE OF ENGINEERING, OSMANABAD - 413501.

Approved by A.I.C.T.E. & Affiliated to Dr.B.A.M.University, Aurangabad.

Photograph

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Course Admitted to : FE/ SE/ TE/ B.E.

Branch : Mech/ EL& T/ C.S. & E./ I.T.

Admission Year :

COE/SS/ADN/2010-11

Form No. 158

Important notices, read before filling-in form
1. Please use black ink to fill in the form and Do not overwrite.
2. Please fill in all fields in CAPITAL letters only.
3. Please strike off whichever is NOT applicable E.g. If you are a male.
Gender : Male/ Female

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

1. Personal Information Section

	Last Name	First Name	Middle Name
Name of the Student : In case of changed Name wife current Name			
Father's/ Husband's Name :			
Mother's Maiden Name : (Name before her marriage)			
Previous Name of the student : in case of changed Name			

Reasons for name change ; Willingly/ After Marriate | Marital Status : Unmarried / Married/ Divorced/Widowed/ Deserted

Date of Birth (DD/MM/YY) / / | Gender : Male / Female

Place of Birth : | Blood Group (With Rh) :

Religion : | Citizen of (Country Name) :

(Address of Correspondance))

State | District | Tehsil : | City / Town / Village :

Address (House No. Street/ area etc.)

Pin Code :

Permanent Address (Write only if different than `Address for Correspondence)

State : | District : | Tehsil : | City/ Town/ Village :

Address (House No.Street/Area etc.) : | Pin Code :

Phone 1 : Personal | Phone 2 : Parents | Phone No.

Mobile Number :

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

Cast : | Sub-Caste : | If Physically challanged : Visually impaired/ Speech and ? or Hearing Impared/ Orthopedic Disorder of Mentally Retarded

3. Social Reservation Information Section (Check ( ) Whichever is applicable. Write name of supporting document attached in section 6)

	Ex-Servicemen/ Ward of Ex-Servicemen		Member of Project Affected Family
	Active-Servicemen/ Ward of Active Servicement		Member of Earthquake Affected Family
	Freedom fighter / Ward of Freedom fighter		Member of Flood/ Famine affected Family
	Ward of Primary Teacher		Resident of Area
	Ward of Secondary Teacher		Kashmir Migrant
	Deserted/ Divorced/ Widowed Women		

Occupation of the Guardian : Service/Business/ Profession/ Farmer/ Laborer/ Retired/ | Annual Income of the Guardian (Rs.)

4. Educational Details Section : (Write "YES" in last coloumn, against the qualifying, on basis of which you are seeking Admission to the said course write No in front of other examination)

Name of Examination Classes	Name of Board / University	Name of School/ College	Admission Year/Roll No.	Branch	Date of Passing DD/MM/YY	Examination Seat No. Last	Grade/Total Mark obtained.	Out of
Std 10th								
Std 12th								
1st Year								
2nd Year								
3rd YTear								
4th Year								

5. Attached Documents and Certificates Section

Sr.No.	Name of Document/ Certificate	Original/ Attested Tru Copy	Attached (Y/N)
1.	Passing Certificate of Std.10th	Attested True copy	
2.	Passing Certificate of Std.12th/ Statement of Marks of Std.12th	Attested True copy	
3.	Leaving Certificate	Attested True copy	
4.	Certificate of Caste with Category	Attested True copy	
5.	Non Creamy Layer Certificate	Attested True copy	
6.	Affidavit for Changed name/ Marriage Certificate/ Govt. Gazatte	Attested True copy	