Government Recognized

Form No.

Maharashtra State Open Education Board

MAHARASHTRA STATE OPEN EDUCATION BOARD

(Constituted by under Indian Trust Act 1882. Government of India)

ADMISSION CUM EXAMINATION FORM

All entries must be filled by the candidate himself/herself in capital letters. Put ✓ for Yes and X for No and "NA" where Not applicable in the box. The Application Form consists of two pages

Affix a recent passport size colour photograph

Do not use pin or stapler.

ATC NO :
(For Office Use only)

PROGRAMME OF STUDY

COURSE CODE* : SESSION* : Year * :

COURSE APPLIED FOR* :

PERSONAL INFORMATION

NAME OF CANDIDATE* :
(As Entered In Secondary / Senior Secondary Certificate)

FATHER'S NAME* :

MOTHER'S NAME* :

DATE OF BIRTH* : ☐ MALE ☐ FEMALE NATIONALITY :

PERMANENT HOME ADDRESS :

CITY/ TOWN* :

STATE :

PIN CODE :

MOBILE NO.* :

PHYSICAL FITNESS:

HEIGHT : WEIGHT :

CHEST: BLOOD GROUP :

E-MAIL :

AADHAR NO.* :

MOBILE NO.* :

ACADEMIC INFORMATION :

Sr. No.	EXAM. PASSED	NAME OF BOARD / UNIVERSITY	MARKS OBTAINED	YEAR OF PASSING

TICK IN APPROPRIATE BOX :

☐ Mark sheet / Certificate Xerox ☐ College or School Living Certificate ☐ ID CARD ☐ Three Photos

DECLARATION (by the applicant) :

I have carefully read the rules and regulation given here in and shall abide by them. I also hereby declare that the information provided by me in the application form is true and correct to the best of my knowledge.

NOTE : Fee once paid will not be refunded. No carry forward of fees, once remitted. The student must complete the course in the batch he / she is admitted to.

DATE : ……/……/……(DD/MM/YYYY)

PLACE : ……

SIGNATURE OF CANDIDATE

FOR AUTHORIZED TRAINING CENTER USE ONLY

Form No.

ATC CODE NO.:

ATC NAME & ADDRESS :

DATE : ……/……/……(DD/MM/YYYY)

Seal & Signature of Center Authority