



Akshar Multipurpose Social Trust's

Form No.

# ASCENT COLLEGE, SOLAPUR

Affiliated to Punyashlok Ahilyadevi Holkar Solapur University, Solapur.

Address : Gat No. 36 & 47, Kandalgaon-Antroli Road,

Tal. South Solapur, Dist. Solapur-413221

www.ascentcollege.org | principal@ascentcollege.org

## Admission Form (B.Sc. - I/II/III)

(Year 20 -20 )

**Personal Information**

Name of the Student : \_\_\_\_\_  
Surname Name Middle Name

Name of the Student : \_\_\_\_\_  
(Devnagari Script)

Aadhar Card No. : \_\_\_\_\_

Father's Name : \_\_\_\_\_

Mother's Name : \_\_\_\_\_

Date of Birth : \_\_\_\_\_ Gender : Male / Female

Place of Birth : \_\_\_\_\_ Religion : \_\_\_\_\_

Caste : \_\_\_\_\_ Caste Category : \_\_\_\_\_

Annual income : \_\_\_\_\_ (Last Financial year)

Blood Group : \_\_\_\_\_ Mother Tounge : \_\_\_\_\_

Address : \_\_\_\_\_  
Pin: \_\_\_\_\_

Cell No.: 1) \_\_\_\_\_ 2) \_\_\_\_\_

Email ID : \_\_\_\_\_



## Educational Details

### Educational Qualification

SSC ( Seat No.) \_\_\_\_\_

Year of Passing	Name of School & Address	Board	Total Marks obtained Max. Marks _____
			% _____

HSC (Seat No.) \_\_\_\_\_

Year of Passing	Name of College & Address	Board	Total Marks obtained Max. Marks _____	Marks Subjects
			% _____	1) English 2) Physics 3) Chemistry 4) 5) 6)

### Course Applying

**B.Sc. I (Subjects)**

Sr.No.	Subjects	
1.	English - Com.	1.
2.	Any Four Subjects from the following	2.
	1) Physics <input style="width: 40px; height: 20px;" type="checkbox"/>	3.
	2) Chemistry <input style="width: 40px; height: 20px;" type="checkbox"/>	4.
	3) Electronics <input style="width: 40px; height: 20px;" type="checkbox"/>	5.
	4) Maths/Botany <input style="width: 40px; height: 20px;" type="checkbox"/>	6.
	5) Statistics ? Zoology <input style="width: 40px; height: 20px;" type="checkbox"/>	7.
		8.
		9.

**Declaration****Declaration by Student**

I hereby declare that, I have read the rules related to admission & the information filled in by me in this form is accurate & true to the best of my knowledge. I will be responsible for any discrepancy, arising out of the form signed by me & I undertake that, in absence of any document the final admission will not be granted and/or admission will be cancelled.

**I am aware of the Maharashtra Prohibition of Ragging Act 1999 & I state that I will abide by all the rules & regulations of the said Act.**

Place :

Date :

(Signature of the Student)

**Office Use****For College / Institute Use only**

Designation	Remark	Signature & Date
Admission Clerk		
Admission Committee	Cash received Rs. Receipt No.	
Accountant		
Registrar / Office		
Principal / Director		