




For Office Use Only	Batch:	Scrutiny	Payment: Online/DD	PI
	Serial:			

	Sadhana College of Education (39) khariwali ambadi naka, tal-bhiwandi, dist-thane Bhiwandi University of Mumbai M.G.Road, Fort, Mumbai-400032, Maharashtra(India) Academic Year: 2021-2022 APPLICATION FORM	Application No : 3277061 Regular
		

Course Applied for : B.Ed.(with Credits) - Regular - Rev16 - F.Y. B.Ed. Sem I [4E00141] (-)	PRN:2016016400155052
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Application Date : 24/02/2022	Payment Category :	
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1.Personal Information	 
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Candidate's Name(Regional) :	
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Candidate's Name as printed on Mark sheet :	VISHWAKARMA POOJA HARISHANKAR [*This name will appear on all University records/documents]
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Father's/Husband's Name :	HARISHANKAR VISHWAKARMA	Mother's Name :	HARISHANKAR
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Marital Status :	UnMarried	Mother Tongue :	
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Place Of Birth : MUMBAI	Gender : Female	Date of Birth (DD/MM/YYYY) : 29/11/1997
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Blood Group :	Religion :	Country of Citizenship : India
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Is Student NRI/ Foreign National : No	Domicile State: Maharashtra
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Address For Correspondence :

State : Maharashtra	District : Mumbai Suburban	Tehsil : Andheri	City/Town/Village :	Location Area : Not Available
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Address (House no,street/area/suburb etc.) :	702 NAVKAR SHAKET, APPT., OLD NAGAR DAS ROAD ANDHERI EAST MUMBAI	Pin Code : 400069
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Contact details

Mobile Number	9769005657	Email ID: poojarudra1998@gmail.com
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2.Legal Reservation Information

Category Type : Reserved	Category : NT-1 (NT-B)		
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Is Specially Abled? No	Is Guardian from EBC (Economic Backward Class)? No	
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3.Social Information(Additional Inforamtion)
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Paper Selected for:

Sem I [4E00141] 75101 - Childhood And Growing Up 75103 - Gender, School and Society UBEDSI.1.5 - Project Based Course 1	75102 - Knowledge and Curriculum UBEDSI.1.4 - Critical Understanding of ICT
Sem II [4E00142] 47612 - Learning And Teaching UBEDSII.2.4 - Project Based Course 2	47613 - Educational Management 47609 - Pedagogy of Teaching:Science

Medium of Instruction : English

4.Guardian Information

Occupation of Guardian : Service	Annual Income of Guardian : 500000
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5.Educational Details

Name of Examination	Name of Board/University and State of University	Name of School/College	Month and Year of Passing	Exam Seat No.	Certificate No.	Mark Obtained	Out of	CGPA	%
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Name of Examination	Name of Board/University and State of University	Name of School/College	Month and Year of Passing	Exam Seat No.	Certificate No.	Mark Obtained	Out of	CGPA	%
Std 10th	MAHARASHTRA STATE BOARD OF SECONDARY AND HIGHER SECONDARY EDUCATION,		March 2014	--	--	316.00	500.00	-- --	63.20
Std 12th 12Th (Science)	MAHARASHTRA STATE BOARD OF SECONDARY AND HIGHER SECONDARY EDUCATION,		July 2016	--	--	313.00	650.00	-- --	48.15
Degree : B .SC (CHEMISTRY)	University of Mumbai,Maharashtra	SIDHHART COLLEGE OF SCIENCE COMMERCE AND ARTS	April 2019	3000202	--	3197.00	5400.00	-- --	59.20
Degree : Master In Chemistry(Inorganic)	University of Mumbai,Maharashtra	ISMAIL YUSUF COLLEGE ARTS SCIENCE AND COMMERCE	June 2021	3543771	--	1536.00	2400.00	-- --	64.00

Your Last Qualifying Exam: Master In Chemistry

7.Other Information

Would you like to apply for Hostel accommodation required

NA

Required Documents and Certificates Section:

- [Passing Certificate of Std 12th / Statement of Marks of Std 12th OR Original Passing Certificate /Statement of Marks of Last Qualifying Exam like degree,diploma,etc.](#)
- [Certificate of Caste with Category.](#)
- [Passing Certificate of Std 10th.](#)
- [Leaving Certificate.](#)
- [Birth Certificate.](#)
- [Passing Certificate of Std. 10th.](#)
- [Passing Certificate of Std. 12th/Statement of Marks of std.12th.](#)
- [Mark/Grade Statement of Semester-IV](#)

**DECLARATION**

I hereby declare that all the information furnished by me in this application form is true, complete and correct to the best of my knowledge and belief. I do understand that I need to obtain and produce all the required documents. I Application No :3277061 (VISHWAKARMA POOJA HARISHANKAR) admit to having understood what constitutes ragging and sexual harassment. I have read the guidelines related to the same. I hereby affirm that if found guilty of ragging or sexual harassment I am liable for punishment according to the university regulations.

Place :	Date :	(Signature of the Candidate)
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For College/Institute/Study Center Use Only

Designation	Remarks / Particulars / Recommendations	Signature and Date
Admission Clerk		
Admission Committee		
Accountant/Cashier	Cash Received: INR	Receipt No.:
Registrar/Office Superintendent		Date:

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