

CSMU 2021-22

Application no. CSMU-2021/INT/.....

CHHATRAPATI SHIVAJI MAHARAJ UNIVERSITY PANVEL, NAVI MUMBAI (INDIA)

Private University Recognized by UGC; Estab. Under Act XXXII- 2018 of Govt. of Maharashtra. Near Shedung toll plaza, Old Mumbai-Pune Highway, Panvel, Maharashtra, India - 410206

Paste recent passport size photograph duly signed by the candidate across photo

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	III. Qualifying Examination Details (as per the eligibility criteria of the University)														
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Name of the Examination			course, eligibility criteria and duration of course							marks/CG					
(last course attend) :															
Examining Board / University:					Language of Instruction:										
Incomplet Request f	Instructions In this form must be signed by the applicant in original. Incomplete forms are not accepted. In this form must be signed by the applicant in original. Incomplete forms are not accepted. In this form must be signed by the applicant in original. Incomplete forms are not accepted. In this form must be signed by the applicant in original. Incomplete forms are not accepted. In this form must be signed by the applicant in original. Incomplete forms are not accepted. In this form must be signed by the applicant in original in														

^{*} please see website (www.csmu.ac.in) for detailed information

IV. Educational Details

- MUST attach self-attested copies of all mark sheets/grade sheets and certificates.
- If originals are not in English, then English version of all documents should also be attached after certification by competent authority.
- Grade Conversion Formula from the Institution is required if marks are not awarded as percentage.

Examination Passed	Univ		e of Institution ard	Year of passing	Ok (%	farks otained (Grade (GPA)	e/			Sub	jęcts			
10th Level or Equivalent (Write Name)														
10 + 2 Level or Equivalent (Write Name)														
Bachelor/Undergraduate Degree or Equivalent 10+2+3 Level (Write Name)														
Master/ Postgraduate Degree or Equivalent 10+2+3+2 Level (Write Name)														
Other Professional Degree/Diploma/ Certificate (Write Name)														
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Mother Tongue:						Lang	uages Kr	nown:						
Knowledge of English: (attach Certificate of Profic English, if available)	iency i		ead: Good	/ Fair / Poor		Write	e: Good /	Fair	/Poor	Spe	ak: Go	ood / Fai	r / Po	or
Have you previously studie been admitted to CSMU: Y			ogramme:					Peri	od:					
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Topic of Proposed Rese (Please attach Research	arch		- Touted	- In ough ti	10 100	эрсоп	TVC LIIID	4331	03/11/10	331011				
Research Publications (attach details)			ls)	No. of Pub	licatio	ons	National				Interr	ational		
Professional Experience (attach details)			•	Period:			Institutio						1	
Note: Candidates shall be co Certificate of TOEFL with min by them entitles them for enro	nsidere imum 7	d for a	dmission to or IELTS v	PhD Courses with minimum	6 band	MU sul ls) and	oject to ful logistical r	filling						

CHECKLIST for Enclosures along with Application Form (Put ☑ mark)

I have checked the Eligibility Criteria for admission to the course to which I have applied.
All columns are completed, correctly in this application form.
Application form has been signed on lower right corner of both pages AND across photograph.
Grade Conversion Formula from the Institution is attached, if marks are not awarded as percentage.
English version of all Academic Certificates and Marksheets, self-attested, translated and certified by a competent authority are attached.
Certificate of Proficiency in English (TOEFL or IELTS) attached (if available).
Application fee receipt is attached.
Self-attested photocopy of Passport Identification Page and all Visa pages are attached.
Self-attested photocopy of Certificate for Proof of Age (Birth Certificate/ Registration of Birth) is attached.
Self-attested photocopy of National ID (if Passport is not issued at the time of application) is attached.
Character Certificate./ Recommendation Letter(s) are attached.
Copy of PIO/OCI card/NRI certificate for PIO/OCI/NRI is attached.
Medical fitness certificate from a medical practitioner confirming no communicable diseases is attached.
Six copies of passport-size photograph are attached.

SIGNATURE OF THE CANDIDATE

DECLARATION

With my signature, I hereby declare that

- 1. The particulars given in this application form are true and authentic to the best of my knowledge and belief.
- 2. I have read and understood the instructions, and I accept the terms of application.
- 3. I intend to return to my native country after completion of the applied programme.
- 4. In the event of my admission to the University, I shall pay the required fees and charges as outlined and that I will not ask for any additional financial privilege from the University during the tenure of my study.
- 5. I will abide by the rules, regulations and policies of the Government of India and Chhatrapati Shivaji Maharaj University and I agree to abide by decisions of the University on all matters regarding this application and during the tenure of my study.
- 6. I shall be a full-time student of the Chhatrapati Shivaji Maharaj University and shall not pursue any other Full-Time programme from any other institution/University during the duration of the programme pursued in this University.
- 7. I am aware of the law regarding the prohibition of ragging as well as the punishments and if found guilty of the offence of ragging and / or abetting ragging, is liable to be punished appropriately. I agree to abide by the punishment in case I am found guilty of ragging and / or abetting ragging.
- 8. I accept that Chhatrapati Shivaji Maharaj University has the right to reject my candidature at any time, if any information provided by me is found false / fake / wrong at any stage.

Date:	
Place:	
	SIGNATURE OF THE CANDIDATE

FOR OFFICE USE ONLY

DOCUMENT VERIFICATION

S No.	Document Name	Verification Status	Remarks	Name of Verifying Officer	Signature with Date
Recomm Verifying	endation of g Officer	Eligible / Not Eligible			

FEE DETAIL

S No.	Fee Category	Amount	Date	Bank Name	Transaction No.	Received by

Remark of Director of Admission / Admission Coordinator:	Admission No.
	Date:

ADMISSION STATUS

Programme offered: (Including Branch)	Programme duration:		
Department	Faculty / Institute:		
VISA type:	VISA number		
Visa Issued at	Visa Validity	FROM	ТО
Remarks			

Recommended by Head/ Director of FSC	(Name and Signature)
Approved by Director of Admissions/ Registrar	(Name and Signature)