


 <p>Punyashlok Ahilyadevi Holkar Solapur University, Solapur http://su.digitaluniversity.ac.in SKILL DEVELOPMENT CENTRE Email ID: sdc_pah@sus.ac.in Application Form For Examination</p>			
<p align="center">Exam to be held in January/May 202</p> <p>Form No - <input type="text"/></p> <p>To, The Coordinator Skill Development Centre, Punyashlok Ahilyadevi Holkar Solapur University, Solapur</p>		<p>Space for Photograph</p>	
<p>Signature of Candidate</p>			
<p>College/Institute/School's Name :</p>			
<p>Full Name:</p>		<p>Mother's Name :</p>	
<p>Write Name in Devanagari (Marathi) :</p>			
<p>Gender : Male/Female/Other</p>		<p>DOB : / /</p>	<p>Religion :</p>
		<p>Caste :</p>	<p>Category :</p>
<p>Address for Correspondence :</p>			
<p>Pin Code :</p>		<p>Contact No. :</p>	<p>E-Mail :</p>
<p>COURSE NAME :</p>			
Sr. No	Title of the exam papers	Theory Paper	Practical Paper
1			
2			
3			
4			
5			
6			
7			
8			
<p align="center"><u>Student has attended the lecture and practical work of prescribed course*</u></p>			
<p>Number of days on which lecture were delivered</p>		<p>No. Of Days attended</p>	<p>Remarks</p>
<p>Exam :</p>		<p>Month:</p>	<p>Year :</p>
<p>Fees Details :</p>			
<p>Documents Attached</p>			
1.		4.	
2.		5.	
<p>Declaration : I hereby declare that all statements made in this application are true, complete and correct to the best of my knowledge and belief . I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.</p>			
Place :	Date	Student's Signature (Please sign strictly in the box shown below)	Principal's/Director's Signature & Seal (Please sign in the box shown below)