



Bharati Vidyapeeth (Deemed to be University)
Department of Photography
Pune-Satara Road, Pune-411046

FORM NO.: _____
MERIT LIST NO.: _____

Admission Form: M.A. Course
(Academic Year: 2020 / 2021)

Please fill up the form in **CAPITAL LETTERS** only and Tick (✓) wherever necessary

1. Name of Student: _____
2. Gender: Male/Female 3. Father's Name: _____
4. Date of Birth: ____ / ____ / ____ 5. Nationality: _____ 6. Domicile: _____
7. Blood Group: _____ 8. Religion: _____ 9. Cast & Category: _____

10. Permanent Address:	11. Correspondence Address:

12. i) Student's Mobile No.: _____ ii) Student's E-mail ID: _____
13. i) Parent's Mobile No.: _____ ii) Parent's E-mail ID: _____

14. Academic Qualifications:

Sr. No.	Qualification	Year of passing	Institute	University / Board	Marks in %	Attempts
I	SSC (10 th)					
II	HSC (12 th)					
III	Graduation in _____					
IV						

15. Academic Programme Applied for:

A) M.A. in Commercial Photography & Cinematography (2 Years)

16. BVSPCAT-2020 administrative fees: DD No.: _____ Date: ____ / ____ / ____

FOR OFFICE PURPOSE

Attached Certificates Checklist: (✓ if attached, wherever applicable) Two sets of photocopies along with original.

- i) Migration Certificate ii) Passing Certificate iii) Attendance Certificate
iv) Transfer Certificate/Leaving Certificate v) Statement of Marks of previous examination
vi) Medical and H.I.V. Test (for international students) vii) Medical fitness certificate (including Blood Group) for Indian Students
vii) Photo ID copy of Passport or Aadhaar Card
I-Card size 5 photographs (Hard Copies)

DECLARATION

I have read and understood the rules and regulations of Bharati Vidyapeeth (Deemed to be University) Department of Photography (BVSP) and Bharati Vidyapeeth (Deemed to be University) given in the BVSP Prospectus 2020-21 and I do hereby agree to abide by the same.

Parent's Name: _____ Student's Name: _____
Parent's Signature: _____ Student's Signature: _____