



**CHHATRAPATI SHAHU INSTITUTE OF BUSINESS EDUCATION AND  
RESEARCH, KOLHAPUR – 416 004**

(An Autonomous Institute)

**D. K. SHINDE SCHOOL OF SOCIAL WORK**

**MASTER OF SOCIAL WORK (M.S.W)**

(Two Year Full Time Programme)

Application No.

Roll No.

## ADMISSION FORM

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To,  
**The Director**  
CSIBER Trust's D. K. Shinde School of Social Work,  
University Road, Kolhapur- 416004 (MS)

Sir,

I hereby apply for admission to the MSW – I, Semester – I of Two year P.G. Degree Course. I declare that:

**Student's Name :** \_\_\_\_\_  
(In Capital letters) Surname First Name Father's/Husband Name Mother's Name

**Student's Name :** \_\_\_\_\_  
(In Devnagari)

**Gender :** \_\_\_\_\_ **Date of Birth :** \_\_\_\_\_ **Place of Birth :** \_\_\_\_\_  
(DD/MM/YYYY)

**Father's/ Guardian's Name :** \_\_\_\_\_

**Present Address :** \_\_\_\_\_  
\_\_\_\_\_

**Permanent Address :** \_\_\_\_\_  
\_\_\_\_\_

**Parents Mobile No.:** \_\_\_\_\_ **Students UID No. :** \_\_\_\_\_

**Student Mobile :** \_\_\_\_\_ **Student Email ID :** \_\_\_\_\_

**Religion :** \_\_\_\_\_ **Caste :** \_\_\_\_\_

**Category :**  SC  ST  VJNT  OBC  SBC  Minority  General

**Bank A/c No:** \_\_\_\_\_ **Bank IFSC Code:** \_\_\_\_\_

**Bank Name & Branch Name :** \_\_\_\_\_

**ENTRANCE EXAMINATION – HALL TICKET**  
D. K. Shinde School of Social Work (CSIBER, Kolhapur )

**Name:** \_\_\_\_\_

**Seat No :** \_\_\_\_\_ **Date of Written Test :** \_\_\_\_\_

Note: At the time of Personal Interview candidate are required to bring all original documents/Certificates

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**Educational Qualification:**

Examination	Board / University	Year of Passing	Percentage	Last Attended College	Subject
SSC					
HSC					
Bachelor's Degree			(Aggregate)		
Master's Degree					
Diploma Certi.					

**Enclosed (Original + Xerox Copy) :**

- |                                    |                          |                                |                          |
|------------------------------------|--------------------------|--------------------------------|--------------------------|
| 1) SSC Mark Sheet/ Certificate     | <input type="checkbox"/> | 6) Addhar Card                 | <input type="checkbox"/> |
| 2) HSC Mark Sheet/ Certificate     | <input type="checkbox"/> | 7) Caste Certificate           | <input type="checkbox"/> |
| 3) Any other Mark sheet            | <input type="checkbox"/> | 8) Caste Validity Certificate  | <input type="checkbox"/> |
| 4) Transfer Certificate (TC)       | <input type="checkbox"/> | 9) Non Cramy layer Certificate | <input type="checkbox"/> |
| 5) GAP Certificate (if applicable) | <input type="checkbox"/> | 10) Income Certificate         | <input type="checkbox"/> |

- The Information given in this application form is true to the best of my knowledge and belief.
- I agree to abide by the rules and regulations of the Institute and undertake that I shall not do anything which would interfere with discipline or spoil the Institute's reputation.
- I am in agreement with the admission procedure laid down by the Institute and would abide by the decisions taken by the Institute.
- I undertake to pay the fees as required at the time of admission as per the rules of the Institute framed from time to time.
- An affidavit shall be filled up and signed by the candidate to the effect that he/she is aware of the law regarding prohibition of ragging as well as the punishments, if found guilty of the offence of ragging he/she is liable to be punished appropriately.

Date :

**Signature of the Student****FOR OFFICE USE ONLY**

Received Rs.	Receipt No.	D.D/ Cheque/ Cash	Date	Signature