



APPLICATION FORM FOR ADMISSION TO THE EXAMINATION FOR B.Ed. (GENERAL)

(Revised Course—From June 2002-2003)

For Office use Only

To,

The Controller of Examinations,
UNIVERSITY OF PUNE, PUNE-411007.

Batch No.			
Sr. No.			

Sir,

I desire to appear for B.Ed. (General) Examination to be held in March / April, 20 .

EXAMINATION DETAILS

1. Examination appearing for (tick right entry) (✓)

Both AREA A & AREA B	AREA A	AREA B
01 <input type="checkbox"/>	02 <input type="checkbox"/>	03 <input type="checkbox"/>

2. Name of the College : _____

3. Name of the Centre at which appearing : _____

SC	ST	OBC	DT/NT	Not Applicable
C	T	O	D	

5. Male	Female
1	2

Previous Name Changed Yes Y
No N

*[Applicant from South India and Upcountries should write the name as it should appear in University records.]

6. *Name : _____
(in Block Capital letters) Surname Name Father's/Husband's Name Mother's Name

7. Name in Devnagari Script : _____

8. TO BE FILLED BY REPEATER STUDENTS ONLY :

(i) Latest previous appearance for B.Ed. (Gen.) Examination at University of Pune
Year Month Seat No.

(ii) Permanent Registration Number, if applicable

Examination Fee	Rs. _____
C.A.P. Fee	Rs. _____
Statement of Marks Fee	Rs. _____
Passing Certificate Fee	Rs. _____
Late Fee	Rs. _____
Special Late Fee	Rs. _____
Total of Exam. Fee Paid	Rs. _____

9. Contents cum Methodology of School Subjects :

1. Marathi Edn. - A	2. Hindi Edn. - B	3. English Edn. - C
4. Sanskrit Edn. - D	5. History Edn. - E	6. Geography Edn. - F
7. Economics Edn. - G	8. Commerce Edn. - H	9. Science Edn. - I
10. Mathematics Edn. - J	11. Urdu Edn. - K	12. Information Technology Edn. - L

10. The category, if the examination fee is reimbursed by Government

BC	EBC	Primary teacher's children	Freedom fighter's children	NT/DT	Service personnel children

11. No. of courses for which you are appearing

12. Details of qualifying examination :

Name of the Degree	Name of the University	Year & Month of Passing	Year in which first degree taken
_____	_____	_____	_____
_____	_____	_____	_____

13. Permanent Address : Pin Code No.

14. **Declaration :** I hereby declare that I have gone through the syllabus and the list of books for the examination. I shall be responsible for any errors and wrong or incomplete entries made by me in the form. I shall not request for any special concession such as a change of name, time or day fixed for the University examination etc. on religious or any other ground.

Name of the Subject	Tick here only if you are appearing for the subject	Fill in following details only if you are claiming exemption			
		*Tick here if claiming exemption for the subject	Details of attempt at which you had obtained 50% or more marks		
			Year	Seat No.	Marks
Area A-Part I					
1. Education in Emerging Indian Society	1010 <input type="checkbox"/>	1011 <input type="checkbox"/>			80
2. Psychology of development and learning	1020 <input type="checkbox"/>	1021 <input type="checkbox"/>			80
3. Secondary & Higher Secondary Education : History, Problem and Management	1030 <input type="checkbox"/>	1031 <input type="checkbox"/>			80
4. Information & Communication Technology and Educational Evaluation	1040 <input type="checkbox"/>	1041 <input type="checkbox"/>			80
5. Content-cum-Methodology of School Subjects	1050 <input type="checkbox"/>	1051 <input type="checkbox"/>			80
					Total 400
Area B-Part II					
6. Internal Tests	2010 <input type="checkbox"/>	2011 <input type="checkbox"/>			30
7. Content Enrichment Programme	2020 <input type="checkbox"/>	2021 <input type="checkbox"/>			40
8. Tutorials	2030 <input type="checkbox"/>	2031 <input type="checkbox"/>			30
					Total - 100
Part III					
9. Core-Training Programme (a) Micro Lessons (b) Integration Lessons	3010 <input type="checkbox"/>	3011 <input type="checkbox"/>			20
10. Special Training Programme (a) Practice Lessons (b) Internship Programme (i) Block Teaching (ii) Other Activities (c) Observations	3020 <input type="checkbox"/> 3030 <input type="checkbox"/> 3040 <input type="checkbox"/> 3050 <input type="checkbox"/>	3021 <input type="checkbox"/> 3031 <input type="checkbox"/> 3041 <input type="checkbox"/> 3051 <input type="checkbox"/>			160 80 60 20
					Total 340
PART IV					
11. Course related practical work (a) For Paper I to III (b) (i) For Paper IV T.B.T. Practicals (ii) For Paper IV Educational Evaluation (c) For Paper V Workshop in content-cum-Methodology	4010 <input type="checkbox"/> 4020 <input type="checkbox"/> 4030 <input type="checkbox"/> 4040 <input type="checkbox"/>	4011 <input type="checkbox"/> 4021 <input type="checkbox"/> 4031 <input type="checkbox"/> 4041 <input type="checkbox"/>			120 80 20 80
12. Working with the Community (a) Co-curricular activities (b) Social Services	4050 <input type="checkbox"/> 4060 <input type="checkbox"/>	4051 <input type="checkbox"/> 4061 <input type="checkbox"/>			20 20
13. Health Programme	4070 <input type="checkbox"/>	4071 <input type="checkbox"/>			20
					Total 360
					Grand Total 1200

- Note : (i) Certified true copies of the mark statement of the above examination's must be attached otherwise the exemption will not be granted.
(ii) No change of exemption in the subject claimed in the above column will entertained after declaration of result.

Date :

Signature of the Candidate

Name of the Candidate : _____

Certificate from the Principal of the College :

- (i) I certify that the above named candidate is /was a student of this college.
(ii) That above named candidate has completed—

Internal test and tutorials :

Core-Training Programme including Integration Lessons.
Special Training Programme Practice Lessons.
Course related Practical Work, Course I to III.
Working with the Community co-curricular activities and S.S.
Organisation and Participation in Co-curricular activities.

- (iii) I am satisfied that he/she is eligible to appear at the said examination as per University rules.

Place : _____

Date : _____

Seal and signature of the Principal of the College.

Certificate to be signed by the Principal of a College of Education (Applicable to Repeater Students appearing for Area B only.)

I certify that Shri/Smt. _____ has put in a minimum attendance of one term necessary for his/her work.

Place : _____

Signature _____

Date : _____

Principal _____ College of Education