

Price : Rs. 20/-



University of Pune

Examination for the Certificate Course in Manuscriptology

To,
THE REGISTRAR, UNIVERSITY OF PUNE,
PUNE-411 007.

Sir,

I request permission to present myself at the ensuing examination for the Certificate Course in Manuscriptology.

Yours faithfully,

Date :

Signature

I. PERSONAL DETAILS

Applicants from South India and Upcountries should write the name as should appear on University record.

Surname Name Father's/Husband's Name Mother's Name

Name in full :
(in CAPITAL LETTERS)
(Also in Devnagari Script)

Race and Religion : ST/ SC/OBC /DT/NT/Not Applicable Male or Female

College or Colleges

Student or Ex-Student

Date of Passing the Graduate or Matriculation }
or S.S.C. having Ten Years' Experience of Librarian }

Residential Address

Permanent Home Address

II. EXAMINATION PARTICULARS

I wish to be examined at the Centre.

CERTIFICATE

Certified that Shri./Smt.
since passing his / her S.S.C. / Matriculation Examination / Ten Years' experience in Liabrarian / Graduation Examination has attended during two terms the Course of Lectures for this examination, as specified hereunder:

<i>Terms</i>	<i>Number of days</i>	<i>Remarks</i>
From July 200 to Oct. 200		
From Nov. 200 to Mar. 200		

Place :

Signature of the Head of the Institute/
Principal of the College

Date :

* Strike off what is not applicable.

Seal of the Institute / College