

Managed by : Dombivli Yuvak Education Trust

ROYAL COLLEGE OF SCIENCE & COMMERCE

(Affiliated to University of Mumbai) Recognised under Section 2(f) of the UGC Act, 1956

Admin Office : P & T Colony, Gandhinagar, Dombivli (E) 421 201, Dist. Thane.

College Address : "Gautam Labdhi", Shivaji Path, Dombivli (E) - 421 201.

Email : royalcollegedbl@gmail.com Website : royalcollegedombivli.com

Tel : 8291990058

YOUR VISION
OUR INSPIRATION



Sr.No.	5068		College Code	Please paste a passport size (35 mm X 45 mm) Photograph here. Do Not Staple. Photo should not exceed the borders
Admission date	Form No.			
Kindly read important notes before filling-in form: 1. Use black ink to fill in the form and Do NOT overwrite. 2. Fill in all fields in CAPITAL letters only. 3. Strike -off whichever is NOT applicable. Gender : Male / Female				
Course applied for (e.g. Bcom / BSC)			Students should sign strictly inside this box only with black ink	
Course Part or Semester applied for (e.g. 1/2/3/4/5/6)				
Applying for Concession EBC / SC / ST / NT / OBC / SBC / PTC / STC / Freedom Fighter / Ex Service Man :				
1. Personal Information Section				
	Last Name	First Name	Middle Name	
Name of the Student :				
(In case of changed name, write current name)				
Name of the Student : (Hindi)				
Name of the Student as printed on std. 12 Passing Certificate				
Father's / Husband Name :				
Mother's Name :				
Previous Name of the Student :				
(In case of changed name)				
Reason for name change : Willingly / after Marriage	Marital Status : Unmarried / Married / Divorced / Widowed / Deserted.			
Date of Birth (DD/MM/YY) :	Gender : Male / Female			
Place of Birth :	Blood Group (with Rh) :			
Religion :	Citizen of (country name) :			
Address of Correspondence				
State :	District :	Taluka :	City/Town/Village :	
Address (House no, Street /area / suburb etc.)			PIN Code	
Permanent Address (Write only if different than Address of Correspondence)				
State :	District :	Taluka :	City/Town/Village :	
Address (House no, Street /area / suburb etc.)			PIN Code	
Contact Details				
Phone # 1 : STD Code	Phone No.	Phone # 2 :	STD Code :	Phone No.
Mobile Number :	Email ID :			
2. Legal Reservation Information Section				
Domicile of State	Category : Open / Reserved	If Reserved : SC / ST / DT (A) / NT(B) / NT (D) / OBC / SBC		
Caste :	Sub-Caste :	If Physically Challenged : Visually Impaired / Speech and / or Hearing Impaired / Orthopedic Disorder or Mentally Retarded		
3. Social Reservation Information Section [Check () whichever is applicable, write name of supporting document attached, in section 6]				
Ex-Serviceman / Ward of Ex-Serviceman	Member of Project Affected Family			
Active-Serviceman / Ward of active-Serviceman	Member of Earthquake Affected Family			
Freedom Fighter / Ward of Freedom Fighter	Member of Flood / Famine Affected Family			
Ward of Primary Teacher	Resident of Tribal Area			
Ward of Secondary Teacher	Kashmir Migrant			
Deserted / Divorced / Widowed Women				
4. Selected / Opted Papers Section [Write Paper Codes or Paper Name Only, in The Boxes]				
Year / Semester : 1/3 / 5 / 7	Semester : 2 / 4 / 6 / 8 (If decided in First Semester only)			
1	1			
2	2			
3	3			
4	4			
5	5			
6	6			
7	7			
8	8			
9	9			

From No. :

5. Education Details Section [Write 'YES' in last column, against the qualifying examination, on basis of which you are seeking admission to the said course write No in front of other examinations] **Please Note : 10th Details are mandatory In any case**

Last College Attended :				Year :		Roll No.:		
Name of Examination	Name of Board / University	Name of School / College	Date of Passing (DD / MM / Y YYY)	Examination Seat No. (Last)	Degree / Passing Certificate No.	Grade / Total Marks Obtained	Out of	Qualifying Examination ? (YES / NO)
Std 10 th								
Std 12 th								
Sem. I								
Sem. II								
Sem. III								
Sem. IV								

6. Guardian Information Section

Guardian's Name _____

Occupation of the Guardian : Service / Business / Profession / Farmer / Retired _____ Annual Income of the Guardian (Rs.) : _____
(last financial year)

Relationship of guardian with applicant : _____ Phone No.: _____

7. Attached Document and certificates Section

Sr. No.	Name of the Document / Certificate	Original / Attested True Copy	Attested (Yes / No)
1	Passing Certificate of Std 10 th	Attested True Copy (Mandatory)	
2	Passing Certificate of Std 12 th / Statement of Marks of Std 12 th	Attested True Copy	
3	Leaving Certificate	Original	
4	Certificate of Caste with Category	Attested True Copy	
5	Non Creamy Layer Certificate	Attested True Copy	
6	Affidavit for changed name / Marriage Certificate / Govt. Gazette		
7	Domicile Certificate	Attested True Copy	
8	Certificate for Physically Challenged	Attested True Copy	
9			
10			
11			

8. Other Information Section

Mother Tongue : _____ Employment Status : Employed / Unemployed _____ Do you wish join NCC / NSS : Yes / No _____

Would you like to apply for Hostel : Yes / No _____

Hobbies, Proficiency and Other Interests : _____

Games and Sports participation : _____
Level (e.g. college / state / national / International etc.) : _____

Personal Identification Marks : 1. _____ 2. _____

9. Declaration by Student

I hereby declare that, I have read the rules related to admission and to the information filled it by me this form is accurate and true to the best of my knowledge. I will be responsible for any discrepancy, arising out of the signed by me and undertaken that, in absence of any documents the final admission will not be granted and / or admission will stand cancel.
I am aware of the Maharashtra Prohibition of Ragging Act, 1999 and I state that I will abide by all the rules and regulations of the said Act.
I undertake that i would complete my three year degree course in Royal College only.

Place : _____
Date : _____ Signature of the student : _____

10. Declaration by Guardian

I have permitted my son / daughter / ward to join your college. The information supplied by him / her in correct to the best of my knowledge. I have acquainted myself with the rules and fees, dues to my son / daughter / ward and to see that he / she observes.

Place : _____
Date : _____ Signature of the parent : _____

11. For College / Institute Use Only

Designation	Remarks / Particulars / Recommendations	Signature and Date
Admission Clerk		
Admission Committee		
Accountant / Cashier	Cash Received : Rs. _____ Receipt No.: _____	
Principal / Director		