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**Department of Agronomy
CERTIFICATE COURSE ON ORGANIC AGRICULTURE**

ADMISSION FORM

Affix here
latest passport
size photograph

1.	Name of the Candidate (In block letters)										
		(Surname)	(Candidate Name)	(Father/Husband Name)							
2.	Date of Birth (In figures)	/ / 19									
3.	Father's/Husband's Name										
4.	Category and Caste SC/ST/VJ/NT/OBC/SBC/OPEN										
5.	Postal Address for Correspondence with Pin Code										
6.	Contact Details: Telephone No. with STD Code, Mobile No.,FAX No. and E-mail ID	Tel.									
		Mobile									
		e-mail									
7.	Are you belongs to Agriculture Family?										
8.	Demand Draft No. , Date & Amount										
9.	Do you belong to the Government / Private Service? (Yes/No)										
10.	Education Qualification										
	Examination or Degree	Class or Division	% of marks or CGPA	Year of Passing	Subject/ Specialization	Name of Univ./ Board					
	S.S.C. Exam										
	H.S.C. Exam										
	Agriculture Diploma										

DECLARATION

I solemnly declare that the above statements made by me are correct to the best of my knowledge and belief. I have read all the terms and conditions thoroughly and also clearly understand that my studies are liable to be terminated without notice, any time during the course of period, if the forgoing information or any part thereof furnished by me is found to be wrong or suppressed.

Date :

Place :

(Signature of the Candidate)