

State Common Entrance Test Cell, Maharashtra State, Mumbai 8th Floor, New Excelsior Building, A.K. Nayak Marg, Fort, Mumbai-400001.(M.S.) Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Post Graduate Technical Courses in Management Admissions Viz. MBA/MMS for the year 2019 - 2020

Application ID: MB19227740

Personal Details

Full Name SHIVANI RAJENDRA DESHMUKH

Nationality Indian

Gender Female

Date of Birth 20-04-1997

Annual Family 50,001 - 1,00,000 Income (₹)

Category-Caste OPEN

Religious Minority/Linguistic N.A

Minority

PWD Type Physical impairment

Type of Candidature Maharashtra State Candidate - Type A

Seat Acceptance Fee is filled by online payment of Rs. 1000/-

Paid Amount (₹) ₹ 1000/-**Payment Status**

Successful

Transaction Id db88f2a0910d7f1d2e7c

Allotment Details

State Level Merit Number 20537

Allotted Choice Code 613710110

Allotted Seat Type PWDOPENH

Preference No. 1

Reporting Details

Institute Vidya Pratishthan Institute of Information Technology, Baramati, Pune

Tution Fees (₹) 13700/-

Course 613710110-M. B. A.

Development Fees (₹) 0/-

Admission Date 04-09-2019

Other Fees (₹) 0/-

Admission Type CAP Round

Total Fees (₹) 13700/-

Remark

Declaration by Candidate : I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the institute/college will have rights to expel, rusticate me from the institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

Date: 14-12-2019

Signature of The Candidate (SHIVANI RATENDRA DESHMUKH)

Place:

INSTITUTE USE ONLY

Declaration by the College/Institute: We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Post Graduate Technical Courses in Management Admissions Viz. MBA/MMS for the year 2019 - 2020 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Vidya Pratishthan Institute of Information Technology, Baramati, Pune

Signature of Institute Officer (6137)

Reported On:20-07-2019 05:46:28 PM

Reported By::6137

Printed On: 14-12-2019 09:52:49 AM

Printed By:6137

Last Modified On: 06-09-2019 05:51:11 PM

Last Modified By:6137

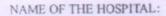
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Government of Maharashtra

Form-IV

Disability Certificate

(In cases other than those mentioned in Forms II and III) (See rule 4)



C.S.M. Hospital, Solapur (Maharashtra, India)

घव्याख्याता अस्थिव्यंगोपचार शास्त्र विभार शा. वैद्यकीय महाविद्यालद

Certificate Number: 125406

This is to certify that I have carefully examined. Person Identification Number: PI52600180440

Aadhar Number: N/A

Shri'Smt./Kum: DESHMUKH SHIVANI RAJENDRA

Father Name: Shri/Smt./Kum. RAJENDRA

Date of Birth (dd/mm/yyyy):

Gender: Female Permanent Address:

House Address: A/P DESHMUKH GALLI AKLUG

Village: Akluj

District: Solapur

Taluka: Malshiros Pincode: 413101

18 years

whose photograph is affixed above, and am satisfied that he / she is a case of Physical Impairment disability. His / Her extent of percentage physical impairment / disability has been evaluated as per guidelines and is shown against the relevant disability in the table below :-

Disability

Affected part of Body

Diagnosis

Disability (in %)

BILATERAL OPERATED CONGENITAL DISLOCATION OF

HUP WITH LUMBAR SCOLIOSIS 41

WITH COMPENSATORY THORACIC SCOLIOSIS

1. The Above condition is Permanent, non-progressive, not likely to improve

Spine

2. Reassessment of disability not necessary

The applicant has submitted following documents as proof of residence:

Audhar Card, Ration card

Physical Impairment

(Signature and Scal of Authorised Signatory of notified Medical Authority)

rofessor Orthopedics

Member

Regn. No.: 87634

Dr. V. P.(Doijad

Member Secretary

Additional Civil Surgeon

Regn. No.: 2005 05 2808 वैद्यकीय उप अधिक्षक

Dr. D. D. Gaikwad

Civil Surgeon President

वैद्यकीय अधिकक

जी हिंदी जिल्हा के स्थापन के स्थापन

डॉ. वै. रम् शा. वद्यकीय महाविद्यालय

सोलापूर.

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