

PRICE : Rs. 30/-



# UNIVERSITY OF PUNE

## Application Form for Admission to the Examination for Diploma Course in Cyber laws

To

THE CONTROLLER OF EXAMINATIONS,  
UNIVERSITY OF PUNE, PUNE-411007.

For office use only
Batch & Sr. No.

Sir,

I desire to appear for the examination for the Diploma Course in Cyber Laws Examination to be held in ..... October/April 20 - 20 .

I hereby declare that I shall not claim any concession on religious grounds.

1. Name of the College : .....

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2. Name of the Centre : .....

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Male	Female
1	2

Fresh	Repeater
1	2

No. of Courses/Subjects

\* Applicant other than Maharashtra i.e. from South India, U.P. Up-countries and Foreigners   should write the name as it should appear on University records. No change in the name will be made hereafter.

4. \* Mention Full Name in legible BLOCK Letters :

.....  
Surname Name Father's / Husband's Name (if necessary)  
( as per Previous Records )

.....  
(Mothers Name)

5. Name in Devnagari Script : .....

6. Old Name, if any : .....

7. Sports activities O.163

N.S.S	N.C.C.	N.P.E.D.	A.E.D.	L.U.T.
1	2	3	4	5

8.

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

Exam. Fee Rs.	.....
Statement of Marks Fee Rs. :	.....
Passing Certificate Fee	.....
CAP Fee Rs. :	.....
Late Fee Rs. :	.....
Total Fee : Rs.	.....

9. Year 20   Month   & Seat No.      For the previous Latest Appearance

10. Permanent Registration Number of Diploma Course in Cyber Laws ( Should be mentioned correctly )

Subject for which appearing : ..... No. of courses appearing   
(Write Subject names & Subject Codes from the back side of this Page very carefully)  
Subject Name Subject Code

.....  
.....  
.....  
.....  
.....

11. Name of Degree of qualifying examination, Date of passing and the name of University : .....

.....

12. Eligibility Certificate number and date, if applicable : .....

13. Address for Correspondence : .....

14. Permanent Home Address : .....

## EXAMINATION PARTICULARS

Attach Attested True Copy of Marklist of Last Diploma Course in Cyber Laws Examination along with Examination Form.

Code No.	Name of the Subject	Tick here only if you are appearing for the Subject	Tick here if claiming exemption for the Subject
101	Basis & Regulatory Framework of Cyber World	<input type="checkbox"/>	<input type="checkbox"/>
102	E-Commerce	<input type="checkbox"/>	<input type="checkbox"/>
103	Information Technology Act 2000	<input type="checkbox"/>	<input type="checkbox"/>
104	Intellectual Property Rights in the Cyber World	<input type="checkbox"/>	<input type="checkbox"/>
105	Dissertation / Field Based Project Report Guidelines for the students (Passing-viva out of 20, Journal out of 80)	<input type="checkbox"/>	<input type="checkbox"/>
Total : 500			

\* If Passed then give the information Seat No. .... Month & Year .....

## DECLARATION

I hereby declare that I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. **I WILL BE RESPONSIBLE** for any errors and wrong or incorrect information supplied by me in the application form. I shall not request for special concession such as change in the time and / or day fixed for the University examination on religious or any other grounds. The Courses/Subjects mentioned by me are as per University rules and regulations.

Yours faithfully,

.....  
Place Date Signature of the Candidate

## C E R T I F I C A T E

I certify that the above named candidate obtained the degree of ..... from the University of ..... in year ..... and is a regular/ex-student of this College. The Courses mentioned by the candidate are as per University rules and regulations, to the best of my knowledge and belief and the entries made by the candidate in the application are correct. He/She has my permission to appear for examination for the subjects for which he/she has applied.

He / She has presume for the number of days specified below, attached during two terms, the course of lectures appointed for this examination :

Terms	Number of Days	Remarks
From June 20 to October 20		
From Nov. 20 to April 20		

.....  
Place Date Stamp Signature of the Principal

**Student desirous to avail of the benefit of O.163 will have to fill in separate prescribed form which is available in the College. The form should be attached, with necessary fees and certificates, alongwith the concerned examination form.**