## **ANNEXURE - IV**

#### AGRICULTURIST CERTIFICATE

(To be signed by an Officer not below the rank of Naib Tahsildar)

This is to certify that Shri/Smt/Ku
(Name of land holder) Father / Mother, Grand father / Grand mother
(Paternal side) of Shri/Ku. (Name of candidate)
of Tahsil
District holds hectare of land in capacity as
owner and the area of the land held by him/her does not exceed the economic
holding as defined in Act of 19 . Further certified that
his/her main source of income is derived from personal cultivation of land
held by him/her.

Seal

Place	Signature
Date	Name
	Designation

Note :-

- i) The seal and designation of certifying officer is compulsory.
- ii) 'Agriculturist' means a person who owns land, the area of which does not exceed the economic holding as defined in Tenancy and Agril. land Act of the revenue region he / she belongs to.
- iii) In case candidate himself / herself holds land, his name should appear as land holder.



## **ANNEXURE - V**

## LANDLESS AGRICULTURAL LABOURER CERTIFICATE

(To be signed by an Officer not below the rank of Naib Tahsildar)

This is to certify that Shri/Smt	••••
(Name of Labourer), Father/Mother of Shri/Ku	•••••
(Name of Candidate) Resident ofTahsil	•••••
Dist holds no agricultural land. His/her principle means	s of
livelihood is manual labour on agricultural land	of
(Name of Land Lord) of Village	•••••
Tahsil District	

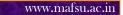
Seal

Place	Signature
Date	Name
	Designation

**Note :** i) This certificate should be only in the name of parents.

ii) Certificate in the name of candidate will not be considered.

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## **ANNEXURE - VI**

#### **PROJECT AFFECTED PERSON CERTIFICATE**

	А	certificate	of	project	affected	person	is	issued	to	Shri	/	Smt.
			•••••			R/o	•••••				••••	•••••
Tahsi	i1		••••		Dist	•••••	••••		••••	. vide	hi	s/her
appli	cati	on number	••••		Dt			•••••				

#### Office of the Collector / District Rehabilitation Officer

This is to certify that t	he	acre / 1	hectare of
land from Group No. / Surve	y No		
belongs to Shri / Smt	R/o		
Tahsil	Dist		

The above said land of Shri/Smt..... has been acquired by the Department of ..... for...... project and hence declared as a project affected person.

Seal

Date : Place :

Signature

District Resettlement Officer / District Rehabilitation Officer or the Competent Authority

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## **ANNEXURE - VII**

## PHYSICALLY HANDICAPPED CERTIFICATE

This is to certify that after clinical examination, it has been found that Shri / Ku...... who desires to pursue B.Tech. (D.T.) degree course in Maharashtra Animal & Fishery Sciences University, Nagpur for the year 2023-24 for claiming the benefit of seat reserved for Persons with disability is an individual with ..... per cent permanent / partial disability pertaining to total body including Chest / Spine / Lower Limb.

It is also certified that he / she fulfills the following criteria.

- a) Absence of disability of total body including disability of chest/spine more than 50%
- b) Absence of disability of lower limb of more than 50%.
- c) Absence of disability of upper limb.
- d) Absence of visual and hearing disability.
- e) Absence of progressive diseases like myopathies etc.
- f) Absence of disabilities which otherwise would interfere in the performance of the duties of a Dairy Technologist.

It is further certified that he / she is medically fit to undergo the professional training course, inspite of his / her physical disability being diagnosed as .....

Place	Signature
Date	Name

Official Seal

Note: i) The disability should be certified by Civil Surgeon / Medical Board.

ii) The disability certificate issued by Civil Surgeon / Medical Board should not be more than three months old from the date of submission of application form.



## **ANNEXURE – VIII**

## SPORTS AND OTHER CO-CURRICULAR ACTIVITIES CERTIFICATE

Т	`his is to cert	ify th	at Shri	/ Ku		•••••		•••••	•••••
son / c	laughter of S	hri. /	Smt	•••••				•••••	
while	studying	in	the	class	XI/XII	has	represe	ented	the
•••••			(Nai	me of S	School / Co	llege) i	n the Int	er Scho	ool /
Inter	Collegiate	/	State	/	National	Leve	l/event	held	at
•••••		•••••	on	•••••	iı	n the	• • • • • • • • • • • • • • •		•••••
event /	game.								

Seal

Place	Signature
Date	Name
	Designation

- **Note :** i) Certificate issued by the appropriate authority (District Sports Officer/ Sports Council/Deputy Director/Education Officer of Zilla Parishad) will be considered.
  - ii) Certificate signed jointly by the District Sports Officer and District Collector and issued on behalf of the 'School Game Federation of India (SGFI)' in case of students of Navodaya Vidyalaya.
  - iii) Certificate issued by the Association of Sports will not be considered.



## ELIGIBILITY CERTIFICATE FOR ECONOMICALLY WEAKER SECTION

(For the purpose of 10% reservation prescribed for Economically Weaker Section vide Government Resolution सामान्य प्रशासन विभाग, शासन निर्णय क्र. राआधो ४०१९/प्र.क्र.३१/१६-अ, dated, 12 February, 2019 AND क्र. राआधो ४०१९/प्र.क्र.३१/१६-अ, दिनांक-२३ डिसेंबर, २०२०)

Certificate No :

Photo

This is to certify that Shri/Smt./Ku. ------ is son /daughter/ward of ------ Taluka ------ He/She is resident of village/city------ Taluka ------ District ------ and he/she belongs to ------ caste/sub caste/class which is not included in the cadres mentioned in the Maharashtra State Public services, Schedule Caste, Schedule Tribe, Denotified Tribes (Vimukta Jati), Nomadic Tribes, Special Backward category and Other Backward Classes Act, 2001 (Maharashtra Act No. 8 of 2004).

As per norms prescribed vide Government of Maharashtra, General Administration Department, and Government Resolution No. राआधो ४०१९/प्र.क्र.३१/१६-अ, dated, 12 February, 2019. His/Her gross family annual income from all sources is Rs. -----/- which is less than Rs. 8,00,000/-. Therefore it is certified that he/she is within category of Economically Weaker Sections.

Place	:	Signature	:
Date	:	Name	:
		Designation	:

(This certificate has been issued on the basis of following proof/evidence/documents)

1.

2.

3.



## AFFIDAVIT BY THE STUDENT

(To be submitted at the office of Associate Dean of concerned college after admission)

I, \_\_\_\_\_\_S/D/o Mr./Mrs. \_\_\_\_\_\_, having been admitted to \_\_\_\_\_\_\_have received a copy of the UGC Regulations on Curbing the Menace of Ragging in Higher Educational Institutions, 2009, (hereinafter called the "Regulations") carefully read and fully understood the provisions contained in the said Regulations.

- 2) I have, in particular, perused clause 3 of the Regulations and am aware as to what constitutes ragging.
- 3) I have also, in particular, perused clause 7 and clause 9.1 of the Regulations and am fully aware of the penal and administrative action that is liable to be taken against me in case I am found guilty of or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging.
- 4) I hereby solemnly aver and undertake that
  - a) I will not indulge in any behavior or act that may be constituted as ragging under Clause-3 of the Regulations.
  - b) I will not participate in or abet or propagate through any act of commission or omission that may be constituted as ragging under clause 3 of the Regulations.
- 5) I hereby affirm that, if found guilty of ragging, I am liable for punishment according to clause 9.1 of the Regulation, without prejudice to any other criminal action that may be taken against me under any penal law or any law for the time being in force.
- 6) I hereby declare that, I have not been expelled or debarred from admission in any institution in the country on account of being found guilty of, abetting or being part of a conspiracy to promote ragging; and further affirm that, in case the declaration is found to be untrue, I am aware that my admission is liable to be cancelled.

Declared this \_\_\_\_\_ day of \_\_\_\_\_ month of \_\_\_\_\_ year.

Signature of deponent

Name :

#### **VERIFICATION**

Verified that the contents of this affidavit are true to the best of my knowledge and no part of the affidavit is false and nothing has been concealed or misstated therein.

Verified at \_\_\_\_\_\_ on this the / / 20

Signature of Deponent

Solemnly affirmed and signed in my presence on this the //20 after reading the contents of this affidavit.

OATH COMMISSIONER

मतदार व्हा, मतदान करा



## ANNEXURE – XI

## **AFFIDAVIT BY PARENT / GUARDIAN**

(To be submitted at the office of Associate Dean of concerned college after admission)

I, Mr./Mrs./Ms.\_\_\_\_\_\_father / mother / guardian of, \_\_\_\_\_\_having been admitted to\_\_\_\_\_\_, have received a copy of the UGC Regulations on Curbing the Menace of Ragging in Higher Educational Institutions, 2009, (hereinafter called the "Regulations") carefully read and fully understood the provisions contained in the said Regulations.

- 2) I have, in particular, perused Clause-3 of the Regulations and am aware as to what constitutes ragging.
- 3) I have also, in particular, perused clause 7 and clause 9.1 of the Regulations and am fully aware of the penal and administrative action that is liable to be taken against my ward in case he/she is found guilty of or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging.
- 4) I hereby solemnly aver and undertake that
  - a) My ward will not indulge in any behavior or act that may be constituted as ragging under Clause-3 of the Regulations.
  - b) My ward will not participate in or abet or propagate through any act of commission or omission that may be constituted as ragging under clause 3 of the Regulations.
- 5) I hereby affirm that, if found guilty of ragging, my ward is liable for punishment according to clause 9.1 of the Regulation, without prejudice to any other criminal action that may be taken against my ward under any penal law or any law for the time being in force.
- 6) I hereby declare that, my ward has not been expelled or debarred from admission in any institution in the country on account of being found guilty of, abetting or being part of a conspiracy to promote ragging; and further affirm that, in case the declaration is found to be untrue, the admission of my ward is liable to be cancelled.

Declared this \_\_\_\_\_ day of \_\_\_\_\_ month of \_\_\_\_\_ year.

Signature of deponent Name : Address : Tel. / Mob.No. :

#### VERIFICATION

Verified that the contents of this affidavit are true to the best of my knowledge and no part of the affidavit is false and nothing has been concealed or misstated therein.

Verified at \_\_\_\_\_\_ on this the / / 20

Signature of deponent

Solemnly affirmed and signed in my presence on this the //20 after reading the contents of this affidavit.

OATH COMMISSIONER



ANNEXURE – XII

## **UNDERTAKING BY THE CANDIDATE**

(To be submitted at the office of Associate Dean of concerned college after admission)

I, ..... Son/daughter of ..... declare as under.

1. That the particulars furnished by me in this application form submitted online are correct to the best of my knowledge and that if at any time any of the said particulars are found false, my admission shall stand cancelled with effect from the date of my admission and that in addition, the Vice-Chancellor of the University may at his discretion, take such other action against me as he may deem fit and that the Vice-Chancellor's decision in this behalf shall be final and binding on me.

2. That if I am admitted to the B.Tech. (D.T.) degree course, I shall fully abide by the rules and the regulations made from time to time by the Maharashtra Animal & Fishery Sciences University and /or the Dean / Associate Dean of the concerned college for the conduct and discipline of the students of this University and or concerned college and that in the event of a breach by me of any of those rules and regulation's the Vice-Chancellor of the University or Dean / Associate Dean of the concerned College may at his discretion, take such action against me as he deems fit and that the decision of the concerned authority in this behalf shall be binding on me.

3. That during tenure of my career as a student of the Maharashtra Animal & Fishery Sciences University by any act of commission/omission on my part within or outside the premises of the College/University, I shall not interfere in the orderly administration and maintenance of discipline in the College/University. I shall not be involved in the act of Ragging and shall be punished as per "Maharashtra Prohibition of Ragging Act of 1999", if found involving in Ragging.

4. That I voluntarily accept the course credit and common examination system of education for course and such changes in the system of examination as may be made from time to time by the University, to which I am seeking admission and for all other higher stages in the course to which I would be subsequently, promoted in due course and at any time in the event to my non compliance with or reluctance to fulfill the requirement of the course credit and common examination system of education, my admission to the concerned college and the Maharashtra Animal & Fishery Sciences University shall stand cancelled.

5. That all the particulars furnished by me in this application form are correct to the best of my knowledge and that I have not concealed any details with respect to my previous academic career, such as punishment and penalties imposed by the school/college/University. If at any time it is found that any of the particulars furnished by me are distorted or that any details of previous academic career have been suppressed or withheld or concealed my admission shall stand cancelled with effect from the date of my admission and that, in addition the Vice-Chancellor of the Maharashtra Animal & Fishery Sciences University may at his discretion take such other action against me as he may deem fit and that his decision shall be final and binding on me.

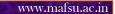
6. I will be abide by the academic rules and regulation of the University and other concern statutory body and changes made therein from time to time.

7. In case of my admission to the instruction course leading to the award of B.Tech. (D.T.) degree, I submit myself to the disciplinary jurisdiction of the Vice-Chancellor/ Dean/Associate Dean of the University/College, and shall observe the rules and regulations made by University in this behalf.

Place	:
Date	:

Signature of Candidate

मतदार व्हा, मतदान करा



#### **ANNEXURE – XIII**

## DECLARATION BY THE CANDIDATE'S PARENT/ GUARDIAN

(To be submitted at the office of Associate Dean of concerned college after admission)

I, Shri/Smt	Father /
Mother / Guardian* of	do hereby
declare as under :	

- 1. That I undertake and bind myself to pay on behalf of my son/daughter/ward to the Institute/ College/ University, by the due date such fees, charges etc. which the College/ University may levy from time to time and that in the event of failure on my part and /on the part of my son/daughter/ward the Associate Dean of the College may take such action against my son/ward as he may deem fit.
- 2. The particulars furnished by my son/ward in this application form are correct to the best of my knowledge and belief. I know that if at any time, that said information is found false, his/her admission shall stand cancelled with effect from the date of admission.
- 4. That I have read fully and understood the undertaking given by my son/daughter/ ward as prescribed in **Annexure XII** and that I unequivocally endorse the same.

Place	:	
-------	---	--

Date : \_\_\_\_\_

(Signature of the Candidate's Parent/Guardian\*)

\* Only if the parents are not alive.



## **ANNEXURE-XIV**

# मतदार हमीपत्र

(To be submitted at the office of Associate Dean of concerned college after admission)

मी श्री / श्रीमती / कुमारी \_\_\_\_\_\_ श्री. \_\_\_\_\_

यांचा / यांची मुलगा / मुलगी वय \_\_\_\_\_ वर्ष राहणार \_\_\_\_\_

तहसिल \_\_\_\_\_\_ जिल्हा \_\_\_\_\_याद्वारे असे जाहीर करतो / करते की,

मी दिनांक \_\_\_\_\_ रोजी १८ वर्षाचा झालो/झाले आहे किंवा होणार आहे. १८ वर्ष पुर्ण झाल्याबरोबर मी माझे नांव मतदार यादीत नोंदवून घेणार आहे अशी मी प्रतिज्ञा करतो/करते.

दिनांक: / /

स्थळ :

विद्यार्थ्यांची सही \_\_\_\_\_

संपुर्ण नांव \_\_\_\_\_

## Voter Undertaking

I Shri/Smt/Miss \_\_\_\_\_\_ son/ daughter of Mr \_\_\_\_\_\_ resident of \_\_\_\_\_\_ Taluka \_\_\_\_\_ District \_\_\_\_\_\_ hereby declare that-

I have completed / going to complete 18 years of age on ///. I pledge that, I will register my name in the voter list immediately after attaining 18 years of age.

Date: / /

Place:

Student's Signature \_\_\_\_\_

Full Name: \_\_\_\_\_

मतदार व्हा, मतदान करा