



Dr. D. Y. Patil Vidyapeeth

(Deemed to be University)

Pimpri, Pune – 411018.

(Re-accredited by NAAC with a CGPA of 3.62 on a four point scale at 'A' Grade)

An ISO 9001: 2015 Certified University

Photograph

Application Form for Admission *Against Vacant Seats* in First Year of Bachelor of Clinical Optometry (B.Optom) and Master of Clinical Optometry (M.Optom) Programme for the Academic Year 2020-21.

Name of the Course applied for: _____

Name of the Candidate: _____

Address for Communication: _____

_____ District: _____

State: _____

Sex: _____

Date of Birth: _____

Telephone: _____

Mobile: _____

Email: _____

Subjects offered in 12th / HSC: _____

Marks Obtained: Physics _____

Chemistry _____

Biology/Mathematics _____

English _____

Year of Passing: SSC: _____ HSC: _____

Percentage of Marks of PCB/M with English (%) _____

Name of University (Graduate) _____

Year of Passing: _____ Marks in % _____ Appearing: _____

Name & Address of the last attended School / College: _____

Name & Address of Parents / Guardians _____

Declaration –I

I hereby declared that the above information is true and complete to the best of my knowledge. I am aware that if any information herein is found to be incorrect or incomplete, my application form will be rejected/admission will be cancelled.

N.B: Please send the color scan copy of duly filled form to info.optom@dpu.edu.in

Place:

Date:

Signature of Candidate