



एस.एन.डी.टी. महिला विद्यापीठ, मुंबई - २०.

**SNDT WOMEN'S UNIVERSITY**

1 N.T. Road, Churchgate, Mumbai – 400 020.

**FORM FOR REGISTRATION OF MANAGEMENT REPRESENTATIVES FOR THE  
PREPARATION OF ELECTORAL ROLL**

To,  
The Registrar,  
SNDT Women's University,  
1, Nathibai Thackersey Road,  
Mumbai – 400 020.

**Paste Recent  
Photo  
& sign across**

Sir,

On behalf of the \_\_\_\_\_ (name of Trust / Society) which conducts \_\_\_\_\_ college (name of college), at \_\_\_\_\_ (place) I am submitting the details herewith as a representative of the Management of the said college for the purpose of preparation of Electoral Roll for election of six Representatives of Management to the Senate, under Section 28(2)(p) of the Maharashtra Public Universities Act, 2016.

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1. Name of the Representative of the Management (Block letters) : \_\_\_\_\_  
(Surname) (First Name) (Middle Name)
  2. Date of Birth (dd/mm/yy) : \_\_\_\_\_
  3. Gender : \_\_\_\_\_
  4. Caste (SC/ST/OBC/NT/DT/Open) : \_\_\_\_\_
  5. Religion : \_\_\_\_\_
  6. Highest Qualification of the Representative: : \_\_\_\_\_
  7. Present designation of the Representative of the Management : \_\_\_\_\_
  8. Present residential address : \_\_\_\_\_  
\_\_\_\_\_
- Pin code \_\_\_\_\_

Signature of Applicant

9. Contact Details : Res.: \_\_\_\_\_  
 Off.: \_\_\_\_\_  
 Mob. : \_\_\_\_\_  
 E mail : \_\_\_\_\_
10. Name of the affiliated college / institution conducted by the Management and full address : \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
11. Type of affiliation granted (First Time Affiliation / Continuation of Affiliation / Permanent Affiliation) : \_\_\_\_\_  
 \_\_\_\_\_
12. Year of establishment of affiliated college / institute : \_\_\_\_\_

**Declaration**

I hereby declare that, the aforesaid information furnished by me as a Representative of the Management is true and correct to the best of my knowledge and belief.

\_\_\_\_\_  
 (Signature of the applicant)

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

**The above application is attested by \_\_\_\_\_  
 (President/Chairman/Secretary)**



**NOTE :-**

- Photocopies of the relevant documents duly attested should be attached with the form.