

PROFORMA 'E'

FORM OF COMMUNICATION OF RESULT OF ELECTION ON OF SECRETARY OF STUDENTS' COUNCIL _____
(TO BE COMMUNICATED IMMEDIATELY AFTER THE ELECTION SO AS TO REACH THE OFFICE OF THE DEAN OF STUDENTS WELFARE NOT LATER THAN 10 DAYS FROM THE DATE OF ELECTION)

STUDENT COUNCIL FORM

Attach Photo

(To be sent after the College elections so as to reach the office of the Dean of Students Welfare immediately)

To,

The Dean of Students Welfare,
S.N.D.T. Women's University,
1. NathibaiThackarsey Road,
Mumbai-400020.

Madam,

This is to inform you that Smt./Kum. _____, bonafide student of this college has been duly elected as the Secretary of Students Council formed under section 40(2) (a) / (b) at the election held on _____. Information in respect of her/age, sex, residential address, educational background and extra-curricular activities etc. is given below:-

Name in full : _____
(Capital & Beginning with surname)

College Name: - _____

Class: - _____ Roll No. _____

Contact No.(R) _____ (Mob) _____

Date of Birth : _____ (in words) Present Age:- _____

Whether belonging to : S.C / S. T/ O.B.C./N.T/D.T
(Enclose attested copy of the certificate if applicable)

Residential Address: _____

Educational Background: from H.S.C onwards for each examination passed (enclosed an attested copy of Mark list & Certificates)

Examination	Board / Univ.	Month & Year of passing	Marks obtained / out of total marks	Class and percentage	Rank / Merit if any

EXTRA-CURRICULAR ACTIVITIES

(Kindly fill-in all necessary details and enclose attested
Copies of certificates)

(I) N.C.C.

Details of the Unit/ : _____
Where enrolled

Rank at present : _____

No. of years for which : _____

She has undergone the training

Details the camps :(1) _____

Attended (2) _____

(3) _____

Examination passed, if : _____

Any with the grade obtained : _____

Prizes, Awards, Honours : _____

If any _____

(II) N.S.S.

Name of the Unit : _____

No. of hours completed : _____

Details of camps attended : 1) _____

2) _____

Prizes, Awards, Honours : _____

Received, if any _____

(III) ADULT EDUCATION/LITERARY PROGRAMME :

No. of hours completed : _____

Details of the project : _____

Work, if any

Other information : _____

(IV) CULTURAL ACTIVITIES/Discipline and year of Participation with position

Inter collegiate competition: _____

Inter University: _____

State: _____

National _____

Inter National _____

Any special Cultural Prizes/Awards received:- _____

(V) SPORTS :

(Discipline and year of Participation with position)

Inter Collegiate Tournament: _____

Inter University:- _____

State: - _____

National:- _____

Inter National:- _____

Any Special Sports Awards/Prizes received:-

(VI) Any other Activities/ : _____

Achievements : _____

(Please specify)

I certify that the election of the secretary to the Students Council was held as per the procedure laid down the one directions of the Vice-Chancellor issued in accordance with the provisions of the Maharashtra Universities Act, 1994. I further certify that the details above are true and correct and that the necessary consent of the students is obtained for considering her to be nominated on the University Students Council under the provision of section 40(4)(a) of the Act.

Specimen signature of the
Selected candidate to be taken
In the presence of the
Principal/Head of the Institution

Signature of the Head of the
College
(SEAL)
of the College/Institution

PROFORMA – 'F'

Communication forms to be sent by the Directors/Heads of the Departments of the University to The Dean of Students Welfare for forwarding the names of one student (in Part I' of the Proforma) from each University Department to be nominated under the provision of Section 40(2)(a)(v) of the Act, and the name of the one deserving Lady student (in Part II' of the Proforma) to be considered for nomination under the provision of Section 40(2)(a) vi) of the Act.

PART (I)-ACADEMIC BIO-DATA OF THE STUDENT
(Pertaining to the provision under section 40(2)(a)(v) of the Act)

NAME OF THE STUDENT (in full with Surname): _____

Residential Address (with Tel. No.): _____

Subject, Class, Div& Roll No. : _____

Specialization (if any): _____

Date of Birth: _____

Academic Record- Preceding Degree Examination: _____

Passed & Name of the University

Year of Passing & Examination Seat No. : _____

Marks obtained out of total marks, class &: _____
Percentage %, Rank, if any

details of C-Curricular, Extra Curricular : _____

& other Activities _____

(Signature of the Student)

**(Signature of the Director/Head
(With the Seal of the Department)**