

List of admitted students for Career Oriented Courses under Ordinance 181

- 1) Name of the College - Dhanaji Nana Chaudhari Vidya Prabodhini's
Loksevak Madhukarrao Chaudhari College of Social Work, Jalgaon
- 2) Name of Career oriented Course - Certificate Course in Child Counseling
- 3) Academic Year - 2018 - 2019
- 4) Intake Capacity - 60

| Sr. No. | Full name of the Students | Gender | Category | Education al Qualificati on # | Year of passing, Cert./Diploma Course (Applicable only for Diploma & Adv. Diploma Course) | Presently admitted Class (F.Y.,S.Y.,T. Y./P.G. | Remark (If Any) |
|---------|---------------------------------|--------|----------|-------------------------------|---|---|------------------|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| 1 | ATKALE SACHIN DHIRAJ | MALE | SC | XII | | | |
| 2 | BADHE DEVENDRA SUDHAKAR | MALE | OBC | XII | | | |
| 3 | BAGUL SAGAR ASHOK | MALE | SC | XII | | | |
| 4 | BHARSAT SACHIN GIRIDHAR | MALE | ST | XII | | | |
| 5 | BHOI PAYAL UTTAM | FEMALE | NT | XII | | | |
| 6 | CHAUDHARI BHAGYASHRI GOPAL | FEMALE | ST | XII | | | |
| 7 | DHAKARE SHUBHAM YUVARAJ | MALE | OBC | XII | | | |
| 8 | GAIKWAD ANUSAYA PANDURANG | FEMALE | ST | XII | | | |
| 9 | GAVALI ASHWINI DEVIDAS | FEMALE | ST | XII | | | |
| 10 | GAVIT DEVKI SONIRAM | FEMALE | ST | XII | | | |
| 11 | JADHAV GANESH PRABHAKAR | MALE | OPEN | XII | | | |
| 12 | JADHAV RAHUL RAJU | MALE | NT | XII | | | |
| 13 | JADHAV NAMRATA TUKARAM | FEMALE | ST | XII | | | |
| 14 | KOLI SATISH BHAGWAT | MALE | SBC | XII | | | |
| 15 | MAHALE VAISHALI RAMESH | FEMALE | ST | XII | | | |
| 16 | NAIK DIPAK ASHOK | MALE | NT | XII | | | |
| 17 | PARDESHI RAVINDRASING DILIPSING | MALE | SC | XII | | | |
| 18 | PATIL KIRAN ARUN | MALE | OBC | XII | | | |
| 19 | PATIL SHRIRANG GOKUL | MALE | OBC | XII | | | |
| 20 | PATIL MAHENDRA LOTAN | MALE | OBC | XII | | | |
| 21 | PATIL PUNAM YUVARAJ | FEMALE | OPEN | XII | | | |
| 22 | PAWAR KAVITA VIJAY | FEMALE | ST | XII | | | |
| 23 | RATHOD PRAVIN SANTOSH | MALE | NT | XII | | | |
| 24 | SAINDANE DIKSHA NARENDRA | FEMALE | OBC | XII | | | |
| 25 | SONAWANE NIRAJ HIMMATRAO | MALE | ST | XII | | | |
| 26 | SONAWANE SUNIL SEVIDAS | MALE | OBC | XII | | | |
| 27 | TADAVI ALTAF IBRAHIM | MALE | ST | XII | | | |
| 28 | TADAVI MAJJID MAKABUL | MALE | ST | XII | | | |
| 29 | TAYADE ANKIT DNYANESHWAR | MALE | SC | XII | | | |
| 30 | VADAR GANESH BARKU | MALE | NT | XII | | | |
| 31 | ZAMBARE LALIT DNYANDEO | MALE | OBC | XII | | | |

CERTIFICATE

This is to certify that the documents regarding educational qualifications of the above students have been verified and found correct. The students mentioned in the list are eligible for the admission to the above mentioned course as per university ordinance-181.

Prof. Dr. Rakesh P. Chaudhari
Co-ordinator
Mobile No. - 9822768902





Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - M.S.W. - II |
|------------|-----------------|------------------|-----------|---|
| CI/DC/619 | 29/11/18 | 500/- | | Roll No. 70 Reg. No. Year 2015-19 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk _____ Co-ordinate _____ Principal _____

To,
 The Principal
 college of Social Work, Jalgaon



Respected Sir,
 I requeste

d for the admission to Certificate Course in child
counseling for the Session 2018-2019

The necessary information for the admission is given below

- 1 Name in full - ATKALE SACHIN DHIRAT
 (In Block Letters) Surname Name Middle Name
2. Mother Name ATKALE CHHAYABAI DHIRAT
3. Father Name ATKALE DHIRAT RAGHUNATH
4. Date of Birth 11-9-1991
5. Caste : SC/ST/NT/SBC/OBC/OPEN S.C
6. Medium : Marathi / English MARATHI
7. Present class M.S.W. - II
8. Permanant Address AT-DHURKHEDA, POST-THEROLE, TAL-RAVER, JALGAON
 (With Phone / Cell No.) 9830311455

Sachin
 Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- ✓3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Roll No. Reg. No. Year |
|------------|-----------------|------------------|-----------|---|
| C1/DC/622 | 29/9/18 | ₹.500/- | | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon



Respected Sir,
I requeste

d for the admission to Certificate Course in child
counseling for the Session 2018-2019

The necessary information for the admission is given below

1. Name in full - Badhe Devendra Sudhakar
(In Block Letters) Surname Name Middle Name
2. Mother Name Badhe Sushila Sudhakar
3. Father Name Badhe Sudhakar Vitthal
4. Date of Birth 18-07-1995
5. Caste : SC/ST/NT/SBC/OBC/OPEN OBC
6. Medium : Marathi / English Marathi
7. Present class MSW II year
8. Permanant Address Khanapur . Tel - Ravex dist - Jalgaon .
(With Phone / Cell No.) 726206128

Badhe
Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Roll No. Reg. No. Year |
|------------|-----------------|------------------|-----------|---|
| 11301723 | 8/10/18 | RS. 1200/- | | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon



Respected Sir,
I requeste

d for the admission to Certificate Course in child
Counseling for the Session 2018-2019

The necessary information for the admission is given below

1. Name in full - Bagul Sakare Ashok
(In Block Letters) Surname Name Middle Name
2. Mother Name Kamal Ashok Bagul
3. Father Name Ashok Bappa Bagul
4. Date of Birth 10 Jun 1995
5. Caste : SC/ST/NT/SBC/OBC/OPEN SC
6. Medium : Marathi / English Mar. Marathi
7. Present class MSW II year
8. Permanant Address At. Sakare post Darghat tal. Malegaon Dist. Nashik
(With Phone / Cell No.) M. No. 8484014450

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counselling

FOR OFFICE USE ONLY

ID - 1022

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - <i>HRM</i> |
|------------|-----------------|------------------|-----------|---|
| 112630 | 29/11/18 | Rs-1000 | <i>CC</i> | Roll No. 08 Reg. No. <i>02</i> Year 2018-19 |

Remarks of the Selection Committee The candidate named above is/is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon

Respected Sir,
I requeste

d for the admission to Certificate Course in Child

Counseling for the Session 2018-2019



The necessary information for the admission is given below

1 Name in full - BHARSAT SACHIN GIRIDHAR
(In Block Letters) Surname Name Middle Name

2. Mother Name MARMA DABAI

3. Father Name GIRIDHAR SITARAM BHARSAT

4. Date of Birth 20/02/1997

5. Caste : SC/ST/NT/SBC/OBC/OPEN ST

6. Medium : Marathi / English MARATHI

7. Present class M 500 - I

8. Permanent Address AT DUMI Post MANKHEJ Tel: SURGANB Dist NASHIK
(With Phone / Cell No.) 8329459718, 7030096153

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

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For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - NT-B <i>Child Counseling</i> |
|-----------------|-----------------|------------------|--------------------|--|
| <i>21/01/24</i> | <i>29/9/18</i> | <i>₹5,400/-</i> | <i>[Signature]</i> | Roll No. <i>025</i> Reg. No. Year <i>2018-19</i> |

Remarks of the Selection Committee: The candidate named above is/is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
College of Social Work, Jalgaon



Respected Sir,

I requeste

d for the admission to Certificate Course in *Child*

Counseling for the Session 201 -201

The necessary information for the admission is given below

1. Name in full - *Bhai Payal Uttam*
(In Block Letters) Surname Name Middle Name
2. Mother Name *Sanita Uttam Bhai*
3. Father Name *Uttam Shivram Bhai*
4. Date of Birth *14-10-1998*
5. Caste : *SC/ST/NY/SBC/OB/COPEN* *NT-B*
6. Medium : *Marathi / English* *Marathi*
7. Present class *TY BSW.*
8. Permanent Address *At post - Jamner.*
(With Phone / Cell No.) *96337412524*

Signature of the Applicant
[Signature]



COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- ✓ 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

ID-1027

Child Counseling

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - REG Roll No. EB Reg. No. 7073 Year 2018-19 |
|------------|-----------------|------------------|-----------|--|
| ei/bc/835 | 29/11/18 | ₹.500/- | e | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon



Respected Sir,
I requeste

d for the admission to **Certificate Course** in child
counseling for the Session 2018-2019

The necessary information for the admission is given below

1. Name in full - CHAUHANARI BHAGYASHRI GOPAL
(In Block Letters) Surname Name Middle Name
2. Mother Name CHAUHANARI SAGUNABAI GOPAL
3. Father Name CHAUHANARI GOPAL DHANVALU
4. Date of Birth 13/03/1996
5. Caste : SC/ST/NT/SBC/OBC/OPEN ST
6. Medium : Marathi / English MARATHI
7. Present class MSW - 1st year
8. Permanent Address Pt. Post. Alongun Tal. Sursajana Dist Nashik
(With Phone / Cell No.) 7378462896

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Human Resource Management Child Counseling | Roll No. 12345678 12345678 | Reg. No. 123456789 123456789 | Year 2018-19 |
|------------|-----------------|------------------|-----------|---|---------------------------------------|---|--------------|
| C/201728 | 9/10/18 | ₹.3000 | | | | | |

Remarks of the Selection Committee The candidate named above is/is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon

Respected Sir,
I requeste



d for the admission to Certificate Course in child

Counseling for the Session 2018-2019

The necessary information for the admission is given below

- 1 Name in full - DHAKARE SHUBHAM Surname YUVARAJ Middle Name
2. Mother Name SARALA
3. Father Name YUVARAJ
4. Date of Birth 28-07-1994
5. Caste : SC/ST/NT/SBC/OBC/OPEN OBC (Tel)
6. Medium : Marathi / English MSW - IIIrd year
7. Present class MSW - IIIrd year
8. Permanent Address Dhanpuehpa colony waki Road Jamner-424206
(With Phone / Cell No.) 9423881313 , 8956661665

Signature of the Applicant



COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

#

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - BSc Child counselling | Roll No. 08 | Reg. No. 507 | Year 2018-19 |
|------------|-----------------|------------------|-----------|--|------------------------|-------------------------|--------------|
| C/2d/634 | 29/12/2018 | Rs 400/- | | | | | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon



Respected Sir,

I requeste

d for the admission to Certificate Course in child
Counseling for the Session 2018-2019

The necessary information for the admission is given below

1. Name in full - GAIKWAD ANUSAYA PANDURANG
(In Block Letters) Surname Name Middle Name
2. Mother Name GAIKWAD BHIMABAI PANDURANG
3. Father Name GAIKWAD PANDURANG UKHA
4. Date of Birth 07/07/1997
5. Caste : SC/ST/NT/SBC/OBC/OPEN ST
6. Medium : Marathi / English MARATHI
7. Present class BSW-IIIrd year
8. Permanent Address AT. Post. Thanapada Tal. Sargang Dist. Nashik
(With Phone / Cell No.) 9359396670

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LORSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

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- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Page No. <i>Child Counseling</i> |
|------------|-----------------|------------------|-----------|---|
| CD/1633 | 29/11/2018 | RS. 500/- | | Roll No. 325 Reg. No. 2119 Year 2018-19 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon



Respected Sir,
I requeste

d for the admission to Certificate Course in child
counselling for the Session 2018-2019

The necessary information for the admission is given below

1. Name in full - GAVALI ASHWINI DEVIDAS
(In Block Letters) Surname Name Middle Name
2. Mother Name GAVALI CHHAYA DEVIDAS
Name Middle Name
3. Father Name GAVALI DEVIDAS SITARAM
Name Middle Name
4. Date of Birth 26/11/1993
5. Caste : SC/ST/NT/SBC/OBC/OPEN ST
6. Medium : Marathi / English MARATHI
7. Present class MSU - 1st year
8. Permanent Address AT Post Karanjali Tal peth Dist Nashik
(With Phone / Cell No.) 80072242079

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

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- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - BSW-III Roll No. 10 Reg. No. 456 Year 2018-19 |
|------------|-----------------|------------------|-----------|--|
| C/300/6417 | 29/9/18 | RS 500/- | | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon



Respected Sir,

I requeste

d for the admission to Certificate Course in Child

Counseling for the Session 2018-2019

The necessary information for the admission is given below

1. Name in full - DEVKI SONTRAM GAVTI
(In Block Letters) Surname Name Middle Name
2. Mother Name GAVTI SAGUNABAI SONTRAM
3. Father Name GAVTI SONTRAM BAITRY
4. Date of Birth 01/12/1998
5. Caste : SC/ST/NT/SBC/OBC/OPEN ST
6. Medium : Marathi / English MARATHI
7. Present class BSW-IIIrd
8. Permanent Address At Post - Raha Tal. Suragana Dist - Nashik
(With Phone / Cell No.) 8554977802

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
COLLEGE OF SOCIAL WORK, JALGAON

Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- ✓ 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

FD 1030 Child counselling

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - S.Y. BSW |
|------------|-----------------|------------------|-----------|---|
| C/DC/638 | 29/9/2018 | RS 500/- | | Roll No. 24 Reg. No. Year 2018-19 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon



Respected Sir,
I requeste

d for the admission to Certificate Course in child
Counseling for the Session 2018-2019

The necessary information for the admission is given below

1. Name in full - Jadhav Ganesh Peabhakar
(In Block Letters) Surname Name Middle Name
2. Mother Name Sarla Peabhakar Jadhav
3. Father Name Peabhakar Raghunath Jadhav
4. Date of Birth 04/04/1999
5. Caste : SC/ST/NT/SBC/OBC/OPEN OPEN
6. Medium : Marathi / English Marathi
7. Present class S.Y. BSW
8. Permanant Address At. Post. Nandangei, Dist: Nandgaon/Masik
(With Phone / Cell No.) 7875692145

Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Roll No. Reg. No. Year |
|------------|-----------------|------------------|-----------|---|
| C/DC/615 | 29/9/18 | RS.4000 | | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon



Respected Sir,

I requeste

d for the admission to Certificate Course in Child
Counselling for the Session 2018-2019

The necessary information for the admission is given below

1 Name in full - JADHAV RAHUL RAJU
(In Block Letters) Surname Name Middle Name

2. Mother Name JADHAV INDUBAI RAJU

3. Father Name JADHAV RAJU SUKHDEV

4. Date of Birth 24 MARCH 1995

5. Caste : SC/ST/NT/SBC/OBC/OPEN NT

6. Medium : Marathi / English MARATHI

7. Present class M.S.W. - IInd Year

8. Permanant Address AT POST PALDHI TEL-JAMNER DIST- JALGAON

(With Phone / Cell No.) 9308880750

Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

FD-1035

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - MSW-I Roll No. 35 Reg. No. 963 Year 2018-19 |
|------------|-----------------|------------------|-----------|--|
| 1001645 | 29/9/18 | ₹.600/- | | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon



Respected Sir,
I requeste

d for the admission to Certificate Course in child counseling
for the Session 2018-2019

The necessary information for the admission is given below

- 1 Name in full - Jadhav Namrata Tukaram
(In Block Letters) Surname Name Middle Name
2. Mother Name Jadhav suman Tukaram
3. Father Name Jadhav Tukaram Mahdu
4. Date of Birth 18/05/1999
5. Caste : SC/ST/NT/SBC/OBC/OPEN ST
6. Medium : Marathi / English Marathi
7. Present class MSW - I
8. Permanant Address at Alangun Tal - surgaha
(With Phone / Cell No.) 9168304841

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- ✓ 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

ID-1063

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - child counseling Roll No. Reg. No. Year 2015-19 |
|------------|-----------------|------------------|-----------|--|
| C/201727 | 9/10/2018 | rs-600/- | @ | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon



Respected Sir,
I requeste

d for the admission to Certificate Course in child Counseling

for the Session 2017-2018

The necessary information for the admission is given below

- 1 Name in full - Koli Satish Bhagwat
(In Block Letters) Surname Name Middle Name
2. Mother Name Kamal Bhagwat Koli
3. Father Name Bhagwat Chitamani Koli
4. Date of Birth 28/03/1998
5. Caste : SC/ST/NT/SBC/OBC/OPEN SBC
6. Medium : Marathi / English marathi
7. Present class Bsw III year
8. Permanant Address Chincholi Tal. yawal Dist - Jalgaon.
(With Phone / Cell No.) 9637053314

[Signature]
Signature of the Applicant



COLLEGE OF SOCIAL WORK, JALGAON

Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

LD-1009

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - CC |
|------------|-----------------|------------------|-----------|--------------------------------------|
| C/DC/602 | 28/9/18 | RS.500/- | | Roll No. Reg. No. Year 2018-19 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon



Respected Sir,
I requeste

d for the admission to Certificate Course in child
counseling for the Session 2018-2019

The necessary information for the admission is given below

1 Name in full - MAHALE VAISHALI RAMESH
(In Block Letters) Surname Name Middle Name

2. Mother Name MAHALE DEVKIBAI RAMESH

3. Father Name MAHALE RAMESH KRUSHNA

4. Date of Birth 03/05/1995

5. Caste : SC/ST/NT/SBC/OBC/OPEN ST

6. Medium : Marathi / English MARATHI

7. Present class MSW - II

8. Permanant Address At - Post - Thimgaon, tal - surgaon (NASHIK)

(With Phone / Cell No.) 7030985390

Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- ✓ 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

ID-1029

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - TY BSW |
|------------|-----------------|------------------|-----------|---|
| c110d637 | 29/9/2018 | ₹ 500/- | @ | Roll No. 19 Reg. No. Year 2018-19 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk _____ Co-ordinate _____ Principal _____

To,
 The Principal
 college of Social Work, Jalgaon



Respected Sir,
 I requeste

d for the admission to **Certificate Course in** child
counseling for the Session 2018-2019

The necessary information for the admission is given below

- 1 Name in full - Nails Dipak Ashok
 (In Block Letters) Surname Name Middle Name
2. Mother Name Gitabai Ashok Nails
3. Father Name Ashok Bharmal Nails
4. Date of Birth 24/10/1995
5. Caste : SC/ST/NT/SBC/OBC/OPEN NT-A
6. Medium : Marathi / English marathi
7. Present class T.Y. BSW
8. Permanant Address At post malcheda panda.
 (With Phone / Cell No.) 7709402099

Ashok
 Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- ✓ 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Roll No. Reg. No. Year |
|------------|-----------------|------------------|-----------|---|
| C1/DC/625 | 1/29/9/2018 | ₹.500/- | | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon



Respected Sir,
I requeste

d for the admission to Certificate Course in ~~Certificate Course in~~ Certificate Course in child counseling
----- for the Session 201 -201

The necessary information for the admission is given below

1 Name in full - PARDESHI RANVIRSING DILIPSING
(In Block Letters) Surname Name Middle Name

2. Mother Name Gitalbai

3. Father Name PARDESHI DILIPSING BABUSING

4. Date of Birth 27/05/1991

5. Caste : SC/ST/NT/SBC/OBC/OPEN SC

6. Medium : Marathi / English Marathi

7. Present class M.S.W II

8. Permanant Address Tukaram caradi heri naka sitag hall nehar Jalga
(With Phone / Cell No.) 9028252570

Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

ID-1052

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Child Counseling |
|------------|-----------------|------------------|-----------|--------------------------------------|
| C/DC/726 | 9/10/2018 | RS-600/- | | Roll No. Reg. No. Year 2018-19 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon



Respected Sir,
I requeste

d for the admission to Certificate Course in child counseling

for the Session 201 -201

The necessary information for the admission is given below

- 1 Name in full - Patil KIRAN ARUN
(In Block Letters) Surname Name Middle Name
2. Mother Name vandana ARUN Patil
3. Father Name ARUN Bhavlat Patil
4. Date of Birth 31/12/1998
5. Caste : SC/ST/NT/SBC/QBC/OPEN QBC
6. Medium : Marathi/English Marathi
7. Present class B.S.W - III Years
8. Permanant Address chancholi Tal - Talwad Dist : Jalgaon
(With Phone / Cell No.) 8975561163

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
COLLEGE OF SOCIAL WORK, JALGAON
 Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- ✓ 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

20-1038

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - MSW 2 nd Roll No. 77 Reg. No. 707 Year 2018-2019 |
|------------|-----------------|------------------|-----------|--|
| C/D/650 | 29/1/18 | ₹1200/- | | |

Remarks of the Selection Committee The candidate named above is / is not recommended for admission

Admission Clerk

Co-ordinator

Principal

To,
 The Principal
 college of Social Work, Jalgaon



Respected Sir,

I requeste

d for the admission to **Certificate Course in** child counseling

----- for the Session 2018-2019

The necessary information for the admission is given below

- 1 Name in full - PATEL SHRIRANG GOKUL
 (In Block Letters) Surname Name Middle Name
2. Mother Name Rambhabai Gokul patel
3. Father Name Gokul Baburao patel
4. Date of Birth 15-07-1986
5. Caste : SC/ST/NT/SBC/OBC/OPEN OBC
6. Medium : Marathi / English Marathi
7. Present class near new english school Nushdabad MSW IInd
8. Permanant Address Near New English school Nushdabad
 (With Phone / Cell No.) 7020568873

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

IID-1047

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - M Sw II |
|------------|-----------------|------------------|-----------|---|
| C/24/670 | 11/10/18 | RS.500/- | | Roll No. 64 Reg. No. Year 2018-19 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon



Respected Sir,
I requeste

d for the admission to Certificate Course in child

Counseling for the Session 2018-2019

The necessary information for the admission is given below

1. Name in full . Pehil mahendra lotan
(In Block Letters) Surname Name Middle Name

2. Mother Name pehil PUSHPH lotan

3. Father Name lotan shivram pehil

4. Date of Birth 3-9-1995

5. Caste : SC/ST/NT/SBC/BC/OPEN merathi

6. Medium : Marathi / English merathi

7. Present class m sw II

8. Permanent Address Ranipura Ganesh Chauk Dandeshu

(With Phone / Cell No.) 8412900533

Signature of the Applicant



LON SHEVAN MADHUKARSAAO CHAUDHARI VIDYA PRABODHINI'S
LON SHEVAN MADHUKARSAAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counselling

FOR OFFICE USE ONLY

2D-10309

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - B.S.M.II Roll No. 21 Reg. No. Year 2018/19 |
|------------|-----------------|------------------|-----------|---|
| ૯૧૧૩૬/૬૬૧ | 29/11/18 | ₹ 600/- | PC | |

Remarks of the Selection Committee: The candidate named above is / is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
College of Social Work, Jalgaon

Respected Sir,
I requeste

d for the admission to Certificate Course in child counselling.



..... for the Session 2018-2019

The necessary information for the admission is given below

1. Name in full - પલ્લિ પુત્રા Surname પુત્રા Name યુવતી Middle Name
2. Mother Name પલ્લિ શાસ્ત્રી યુવતી
3. Father Name પલ્લિ યશ્વંત ગુવરાજી યશ્વંત.
4. Date of Birth 22/06/1998.
5. Caste : SC/ST/NT/SBC/OBC/OPEN
6. Medium : Marathi / English B.S.M.II ગ્રામ
7. Present class 11 post chunchale tal guvat dist tal.
8. Permanent Address 11 post chunchale tal guvat.
(With Phone / Cell No.) 980055075

Signature of the Applicant

પલ્લિ



COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Roll No. Reg. No. Year |
|------------|-----------------|------------------|-----------|---|
| C/SC/624 | 29/11/18 | Rs. 500/- | | |

Remarks of the Selection Committee: The candidate named above is/is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon



Respected Sir,
I requeste
d for the admission to Certificate Course in child counseling

..... for the Session 201 -201

The necessary information for the admission is given below

1. Name in full - paudae kavita Vijay
(In Block Letters) Surname Name Middle Name
2. Mother Name chabibai vijay paudae
3. Father Name vijay Devaman paudae
4. Date of Birth 06/09/1996
5. Caste : SC/ST/NT/SBC/OBC/OPEN ST
6. Medium : Marathi / English Marathi
7. Present class MSW - II
8. Permanent Address at. gandolmakh tal. kelusam (Nashik)
(With Phone / Cell No.) 8308425060

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- ✓ 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

ID-1008

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - T.Y. B.S.W. Roll No. 27 Reg. No. Year 2018-19 |
|------------|-----------------|------------------|-----------|--|
| 549 | 26/10/18 | 0300/- | | |

Remarks of the Selection Committee The candidate named above is/is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon



Respected Sir,
I requeste

d for the admission to **Certificate Course in child**
Counseling for the Session 2018-2019

The necessary information for the admission is given below

1. Name in full - **Rathod Parvin Somtosh**
(In Block Letters) Surname Name Middle Name
2. Mother Name **Yashodkai Somtosh Rathod**
3. Father Name **Somtosh Bhika Rathod**
4. Date of Birth **04/05/1997**
5. Caste : SC/ST/NT/SBC/OBC/OPEN **NT (A)**
6. Medium : Marathi / English **Marathi**
7. Present class **T.Y. B.S.W.**
8. Permanent Address **AT. Kheelgaon post, Khaalke. Bk.**
(With Phone / Cell No.) **96041948429.**

Signature of the Applicant

Rathod



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- ✓ 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Ty B.S.M Child Counseling | Roll No. 28 | Reg. No. | Year 2018-19 |
|------------|-----------------|------------------|-----------|--|-------------|----------|--------------|
| C/2018/15 | 29/19/18 | ₹.600/- | | | | | |

Remarks of the Selection Committee The candidate named above is/is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon

Respected Sir,
I requeste

d for the admission to **Certificate Course in** Child Counseling

for the Session 2018-2019

The necessary information for the admission is given below

- 1 Name in full - Sainddave Girishha Narendra
(In Block Letters) Surname Name Middle Name
2. Mother Name Yasita Narendra Sainddave
3. Father Name Narendra Rambhau Sainddave
4. Date of Birth 25/11/1995
5. Caste : SC/ST/NT/SBC/OBC/OPEN OBC
6. Medium : Marathi / English Marathi
7. Present class Ty. B.S.M
8. Permanent Address At Post : Talgaon
(With Phone / Cell No.) 8166716615

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - <i>Child Counseling</i> | Roll No. <i>70</i> | Reg. No. Year |
|-----------------|-----------------|------------------|--------------------|---------------------------------|--------------------|---------------|
| <i>C/20/729</i> | <i>9/10/18</i> | <i>RS.400/-</i> | <i>[Signature]</i> | | | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
College of Social Work, Jalgaon

Respected Sir,
I requeste



d for the admission to Certificate Course in child
Counseling for the Session 2018-2019

The necessary information for the admission is given below

1. Name in full - SANAWANE NIRAJ HIMMATRAO
(In Block Letters) Surname Name Middle Name
2. Mother Name SANAWANE TYOTI HIMMATRAO
3. Father Name SANAWANE HIMMATRAO RAJARAM
4. Date of Birth 16/07/1996
5. Caste : SC/ST/NT/SBC/OB/OPEN ST
6. Medium : Marathi / English Marathi
7. Present class MSW I YEAR
8. Permanent Address SANE GURUTI NAGAR, YAWAL ROAD CHOPDA
(With Phone / Cell No.) 9511264583

[Signature]
Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

TD-1052

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - <i>Child Counseling</i> Roll No. Reg. No. Year |
|----------------|-----------------|------------------|--------------------|---|
| <i>CI/0069</i> | <i>11/01/18</i> | <i>₹.500/-</i> | <i>[Signature]</i> | <i>2018-19</i> |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk:

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon

Respected Sir,
I requeste



d for the admission to Certificate Course in *Child*

Counseling for the Session 201 -201

The necessary information for the admission is given below

- 1 Name in full - *SONAWANE SUNIL DEVTADAS*
(In Block Letters) Surname Name Middle Name
2. Mother Name *GAUKANARATI DEVTADAS SONAWANE*
3. Father Name *DEVTADAS RAMDAS SONAWANE*
4. Date of Birth *03/08/1988*
5. Caste : SC/ST/NT/SBC/OBC/OPEN *OBC.*
6. Medium : Marathi / English *MARATHI*
7. Present class *MSW - I*
8. Permanent Address *AT/POST - SUNASGAON D.K.IL.*
(With Phone / Cell No.) *TAL - JAMNER, DIST - TALGAON, (425114)*
Mob- No- 8208944830, 9588814454

[Signature]
Signature of the Applicant

SONAWANE SUNIL D.



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counselling

FOR OFFICE USE ONLY

T.D. - 1059

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - PGSW - III rd |
|------------|-----------------|------------------|-----------|---|
| CL/20/214 | ૩/૧૦/૧૯ | 15000/- | | Roll No. ૬૬ Reg. No. Year 2018/19 |

Remarks of the Selection Committee The candidate named above is/is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
College of Social Work, Jalgaon

Respected Sir,
I requeste



d for the admission to Certificate Course in Child

Counseling for the Session 2018-2019

The necessary information for the admission is given below

1. Name in full TADAVI ALINF TARRHM
(In Block Letters) Surname Name Middle Name
2. Mother Name TADAVI AMINA TARRHM
3. Father Name TADAVI TARRHM SHMSHER
4. Date of Birth 10/02/1996
5. Caste : SC/ST/NT/SBC/OBC/OPEN ST
6. Medium : Marathi / English MARATHI
7. Present class
8. Permanent Address PLOT No-05 PANDURAN & SARAF NA6HR YUNVAL
(With Phone / Cell No.) 7757868673 / 0285261486

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

JD-1056

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - MSW-II Roll No. 56 Reg. No. Year 2018-19 |
|------------|-----------------|------------------|-----------|---|
| 11/02/18 | 3/10/18 | ₹.500/- | | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

P

To,
The Principal
college of Social Work, Jalgaon

Respected Sir,
I requeste

d for the admission to Certificate Course in Child Counseling

..... for the Session 2018-2019

The necessary information for the admission is given below

- 1 Name in full - TAPAYI MAJID MAKABUL
(In Block Letters) Surname Name Middle Name
2. Mother Name AINURBAI
3. Father Name MAKABUL
4. Date of Birth 01/06/2018
5. Caste : SC/ST/NT/SBC/OBC/OPEN
6. Medium : Marathi / English MARATHI
7. Present class
8. Permanent Address AT. POST. LOHARA
(With Phone / Cell No.) 95953312117

Signature of the Applicant





DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

JD-1021

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - C C |
|------------|-----------------|------------------|-----------|--------------------------------------|
| C1304/629 | 29/9/18 | RS 300/- | | Roll No. Reg. No. Year 2018-19 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk:

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon

Respected Sir,

I requeste

d for the admission to Certificate Course in child

counseling for the Session 2018-2019

The necessary information for the admission is given below

1. Name in full - TARADE ANKIT DNYANESHWAR
(In Block Letters) Surname Name Middle Name

2. Mother Name SHARADA

3. Father Name DNYANESHWAR

4. Date of Birth 19/09/1998

5. Caste : SC/ST/NT/SBC/OBC/OPEN SC

6. Medium : Marathi / English MARATHI

7. Present class MSW - 1st YEAR

8. Permanent Address AT. NEHETA TAL. RAVER DIST. TALGAON

(With Phone / Cell No.) 7798231946

Signature of the Applicant





DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Roll No. Reg. No. Year |
|------------|-----------------|------------------|-----------|---|
| C/EX/621 | 29/9/18 | RS.500/- | | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon



Respected Sir,
I requeste

d for the admission to Certificate Course in child

Counseling for the Session 201 -201

The necessary information for the admission is given below

1. Name in full - Vadar Ganesh Barku
(In Block Letters) Surname Name Middle Name
2. Mother Name Apita Barku Vadar.
3. Father Name Barku Bendu Vadar.
4. Date of Birth 11/08/1915
5. Caste : SC/ST/NT/SBC/OBC/OPEN NT
6. Medium : Marathi / English Marathi, English.
7. Present class M3W-D
8. Permanent Address AT Post - Shendurni, Tal-SAMNER.
(With Phone / Cell No.) 9561508497

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Child Counseling | Roll No. | Reg. No. | Year |
|------------|-----------------|------------------|-----------|--------------------------|----------|----------|---------|
| CLB/1732 | 9/10/18 | ₹.300/- | | | | | 2018-19 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon



Respected Sir,
I requeste

d for the admission to Certificate Course in Child Counseling

..... for the Session 2018-2019

The necessary information for the admission is given below

- 1 Name in full - ZAMBARDE AMIT DNYANDEO
(In Block Letters) Surname Name Middle Name
2. Mother Name ZAMPARE SUREKHA DNYANDEO
3. Father Name ZAMPARE DNYANDEO PANDHARINATHI
4. Date of Birth 06.09.1996
5. Caste : SC/ST/NT/SBC/OBC/OPEN OBC
6. Medium : Marathi / English Marathi
7. Present class M.S.IV I Year
8. Permanent Address W.P. BHARATI TAL. DEST - JALGAON
(With Phone / Cell No.) 8657826344

Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- ✓ 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - <u>Child Counseling</u> |
|-----------------|----------------------------------|------------------|--------------------|---|
| <u>G.10/315</u> | <u>9/11/19</u> <u>30-9-19</u> | <u>600/-</u> | <u>[Signature]</u> | Roll No. <u>19</u> Reg. No. Year <u>2019-20</u> |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
 The Principal
 Loksevak Madhukarrao Chaudhari
 College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in child

Counseling for the Session 2019-2020

The necessary information for the admission is given below

1 Name in full - Marathe Mansi Sanjay
 (In Block Letters) Surname Name Middle Name

2. Mother Name Nita Sanjay Marathe

3. Father Name Sanjay Narayan Marathe

4. Date of Birth 13/11/1998

5. Caste : SC/ST/NT/SBC/OBC/OPEN open

6. Medium : Marathi / English Marathi

7. Present class Bsw - III

8. Permanent Address 347 'Shivaneri' Shivaji Nagar Jalgaon .

(With Phone / Cell No.) 9403606472

[Signature]
 Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - MSW <u>Child counseling</u> |
|------------|-----------------|------------------|-----------|--|
| c/0317 | 30/9/19 | Rs 1200/- | | Roll No. Reg. No. Year 2019-20 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
 The Principal
 Loksevak Madhukarrao Chaudhari
 College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in Child Counseling

for the Session 2019-2020

The necessary information for the admission is given below

1 Name in full - Patil Dipak Bharat
 (In Block Letters) Surname Name Middle Name

2. Mother Name Patil Surekha Bharat

3. Father Name Patil Bharat Barku

4. Date of Birth 10 - march - 1997

5. Caste : SC/ST/NT/SBC/OBC/OPEN OBC

6. Medium : Marathi / English Marathi

7. Present class MSW - II year

8. Permanent Address At: Ajande Post - Dahinard Tal. Shisapur (Dhule)

(With Phone / Cell No.) 7770053942

Patil
 Signature of the Applicant

| o. | Roll No | Student Id | STUDENT NAME |
|-----------|---------|------------|----------------------------|
| Id Couns. | | | |
| n : --- | | | |
| 1 | | 2144512 | ASWAR VIKRAM SANTOSH |
| 2 | | 2107501 | BHOYE FULA SURESH |
| 3 | | 2144728 | CHAUDHARI LAHAN VALAL |
| 4 | | 2169629 | CHAVHAN DIPALI VIJAY |
| 5 | | 2145560 | GAVALI DINKAR GANGARAM |
| 6 | | 2144356 | KALE TEJASWINI MARUTI |
| 7 | | 2170088 | KATKAR PAVAN WASUDEO |
| 8 | | 2170118 | KHADE DNYANESHWAR GAJANAN |
| 9 | | 2170007 | KHAIRNAR VAISHNAVI KISAN |
| 0 | | 2143202 | KHAMBAYAT POOJA CHINTAMAN |
| 1 | | 2144755 | KOKANI SHANTILAL SHAMALAL |
| 2 | | 2143023 | MARATHE KOMAL BHAGWAN |
| 3 | | 2169638 | PARADESHI SHUBHAM SURESH |
| 4 | | 2127360 | PATIL VAISHALI PRAKASH |
| 5 | | 2143205 | PAWAR BHARATI CHHOTIRAM |
| 6 | | 2110115 | PAWAR SHRIKANT BADRINATH |
| 7 | | 2143286 | PAWARA SUNIL AANNA |
| 8 | | 2144687 | RATHOD TULASIRAM HARICHAND |
| 9 | | 2127422 | SATDIVE KARUNA GAUTAM |
| | | 2115502 | SONAWANE VAISHALI NANABHAU |
| | | 2127426 | SURYAVANSHI SHITAL RAMBHAU |
| | | 2145639 | SURYAWANSHI ARCHANA VASANT |
| | | 2116425 | TADAVI SANJANA ARMAN |
| | | 2143173 | TAYADE POOJA BHAGWAT |
| | | 2170134 | THAKARE SAVITA EKNATH |
| | | 2144740 | VASAVE VILAS BIJYA |
| | | 2116134 | WADEKAR SUREKHA PRASHANT |
| | | 2170026 | WAGHMARE KAMLESH KESHAV |



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - <u>Child</u> |
|------------|-----------------|------------------|--------------------|--|
| <u>47</u> | <u>16/09/19</u> | <u>50/-</u> | <u>[Signature]</u> | Roll No. Reg. No. Year <u>1922</u> |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



VIKRAM SANTOSH ASWAR
DATE: 15/3/2018

Respected Sir,

I requested for the admission to Certificate Course in child counseling

for the Session 2019-2020

The necessary information for the admission is given below

1 Name in full - Aswar Vikram Santosh
(In Block Letters) Surname Name Middle Name

2. Mother Name Aswar sarala santosh

3. Father Name Aswar santosh dhondu

4. Date of Birth 16-09-1995

5. Caste : SC/ST/NT/SBC/OBC/OPEN OBC

6. Medium : Marathi / English Marathi

7. Present class YES

8. Permanent Address 2M Nagar shirsoli P.O Tal Dist Jalgaon

(With Phone / Cell No.) 787579660

Vikram
Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Roll No. Reg. No. Year |
|------------|-----------------|------------------|-----------|---|
| 258 | 24/8/2015 | ₹5600/- | | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon



Respected Sir,
I requeste

d for the admission to Certificate Course in child
Counseling for the Session 201 -201

The necessary information for the admission is given below

1 Name in full - Bhoye fula suresh
(In Block Letters) Surname Name Middle Name

2. Mother Name Bhoye sumitra suresh

3. Father Name Bhoye suresh tukaram

4. Date of Birth 8-1-1996

5. Caste : SC/ST/NT/SBC/OBC/OPEN

6. Medium : Marathi / English

7. Present class -

8. Permanant Address At Post - Nanduri Ta. Kalvan

(With Phone / Cell No.) 9422714043

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - <i>Child Care</i> |
|------------|-----------------|------------------|--------------------|--|
| <i>2</i> | <i>16/9/19</i> | <i>1200/-</i> | <i>[Signature]</i> | Roll No. Reg. No. Year <i>1420 -</i> |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in child counseling

for the Session 2019 -2020

The necessary information for the admission is given below

1 Name in full - CHAUDHARI LAHAN VALAL
(In Block Letters) Surname Name Middle Name

2. Mother Name CHAUDHARI DHEDI VALAL

3. Father Name CHAUDHARI VALAL LAHANU

4. Date of Birth 01/06/1996

5. Caste : SC/ST/NT/SBC/OBC/OPEN ST

6. Medium : Marathi / English marathi

7. Present class MSW

8. Permanent Address AT. Usamul. Post. Purgarne Tal. surgana dist. nashik

(With Phone / Cell No.) 7791996771

[Signature]
Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Child Counseling |
|------------|-----------------|------------------|-----------|--------------------------------------|
| C10/298 | 2019/2019 | RS.700/- | | Roll No. Reg. No. Year 2019-20 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in Certificate course
in child counseling for the Session 2019-2020

The necessary information for the admission is given below

- 1 Name in full - Chauhan Dipati Vijay
(In Block Letters) Surname Name Middle Name
2. Mother Name Ashabai vijay chauhan
3. Father Name Vijay pursharan chauhan
4. Date of Birth 1/1/1996
5. Caste : SC/ST/NT/SBC/OBC/OPEN NT
6. Medium : Marathi / English Marathi
7. Present class _____
8. Permanent Address To. Takali Dist. Jalgaon
(With Phone / Cell No.) MO. 9764586472

Signature of the Applicant

D.V. Chauhan



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - <u>child counseling</u> |
|------------|-----------------|------------------|--------------------|---|
| <u>894</u> | <u>12/11/19</u> | <u>500/-</u> | <u>[Signature]</u> | Roll No. Reg. No. Year <u>2019-20</u> |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in child counseling

for the Session 2019-2020

The necessary information for the admission is given below

- 1 Name in full - GAVALI DENKAR GANGARAM
(In Block Letters) Surname Name Middle Name
2. Mother Name RANJANABAI
3. Father Name GANGARAM LAHANU GAVALI
4. Date of Birth 05/11/1995
5. Caste : SC/ST/NT/SBC/OBC/OPEN ST
6. Medium : Marathi / English Marathi
7. Present class MSW - IInd yr.
8. Permanent Address At - Umbhede post - Madni Tal - Surjona Dist - Nashik
(With Phone / Cell No.) 8975359064 / 9325161971

[Signature]
Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

Provisional
2144355

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - <u>Child Care</u> |
|------------|-----------------|------------------|--------------------|---|
| <u>03</u> | <u>16/9/19</u> | <u>600/-</u> | <u>[Signature]</u> | Roll No. Reg. No. Year <u>19.20</u> |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in Child Counselling

for the Session 2019-2020

The necessary information for the admission is given below

1 Name in full - Kale Tejaswini Maruti
(In Block Letters) Surname Name Middle Name

2. Mother Name BHARATI

3. Father Name MARUTI

4. Date of Birth 15-09-1999

5. Caste : SC/ST/NT/SBC/OBC/OPEN NT(c)

6. Medium : Marathi / English Marathi

7. Present class T.Y. BSW

8. Permanent Address SAYGAON Tel. CHALISGAON Dist. JALGAON

(With Phone / Cell No.) 9743925355

[Signature]
Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| | | | | |
|----------------|------------------|------------------|-----------|----------------------|
| Receipt No | Date of Payment | Amount Deposited | Signature | Class - <u>Child</u> |
| <u>C10/303</u> | <u>21/9/2019</u> | <u>Rs 600/-</u> | | Roll No. |
| | | | | Reg. No. |
| | | | | Year <u>2019-20</u> |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk _____ Co-ordinate _____ Principal _____



To,
 The Principal
 Loksevak Madhukarrao Chaudhari
 College of Social Work, Jalgaon

Respected Sir,
 I requested for the admission to Certificate Course in child counseling.

_____ for the Session 2019-2020

The necessary information for the admission is given below

1 Name in full - KATKAR PAVAN WASUDEO
 (In Block Letters) Surname Name Middle Name

2. Mother Name MANORAMABAI

3. Father Name WASUDEO

4. Date of Birth 20-01-1997.

5. Caste : SC/ST/NT/SBC/OBC/OPEN OBC

6. Medium : Marathi / English Marathi

7. Present class MSW. II Year

8. Permanent Address AT- Naratanpur . Po- Nimgaon . Ta- Nandura. Dist- Buldhana

(With Phone / Cell No.) 8390108849.

Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - <u>Child</u> |
|----------------|------------------|------------------|--------------------|---|
| <u>C10/306</u> | <u>21/9/2019</u> | <u>₹ 600/-</u> | <u>[Signature]</u> | Roll No. Reg. No. Year <u>2019-20</u> |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in child counseling

for the Session 2019-2020

The necessary information for the admission is given below

1 Name in full - KHADE DNYANESHWAR GAJANAN
(In Block Letters) Surname Name Middle Name

2. Mother Name MANDARAI

3. Father Name GAJANAN

4. Date of Birth 17-12-1996

5. Caste : SC/ST/NT/SBC/OBC/OPEN OBC

6. Medium : Marathi / English Marathi

7. Present class M.S.W-II year

8. Permanent Address At. Po- Wadi, Ta. Nandurda, Pi. Buldhana

(With Phone / Cell No.) 7264950298

[Signature]
Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - child |
|------------|-----------------|------------------|-----------|--------------------------------------|
| C10/301 | 21/9/2019 | ₹.1000/- | | Roll No. Reg. No. Year 2019-20 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in ~~Self~~ Child Counseling

for the Session 2019-2020

The necessary information for the admission is given below

- 1 Name in full - Khairnar Vaishnavi Kisan
(In Block Letters) Surname Name Middle Name
2. Mother Name Khairnar Radhabai Kisan
3. Father Name Khairnar Kisan Gokul
4. Date of Birth 08/02/1997
5. Caste : SC/ST/NT/SBC/OBC/OPEN OBC
6. Medium : Marathi / English Marathi
7. Present class MSW-II
8. Permanent Address At po. Anturli, Tal. Muktanagar, Dist. Jalgaon.
(With Phone / Cell No.) 9423420017

Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - BSW III ^{Child counseling} |
|------------|-----------------|------------------|-----------|--|
| 275 | 13-09-2019 | 500/- | | Roll No. 85 Reg. No. Year 2019/20 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in child

Counseling for the Session 2019-2020

The necessary information for the admission is given below

1 Name in full - khambayat Pooja Chintaman
(In Block Letters) Surname Name Middle Name

2. Mother Name parvati

3. Father Name chintaman

4. Date of Birth 07/10/1999

5. Caste : SC/ST/NT/SBC/OBC/OPEN ST

6. Medium : Marathi / English marathi

7. Present class BSW III

8. Permanent Address At. pa. Tal. Surgana

(With Phone / Cell No.) Di - Nashik 9112699187

Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- ✓ 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class |
|------------|-----------------|------------------|-------------|-----------|
| S | 16/9/19 | 500/- | [Signature] | CH-1009 |
| | | | | Roll No. |
| | | | | Reg. No. |
| | | | | Year 1920 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal



To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon

Respected Sir,

I requested for the admission to Certificate Course in Child Counseling

for the Session 2019-2020

The necessary information for the admission is given below

1 Name in full - KOKANT SHANTILAL SHAMLAL
(In Block Letters) Surname Name Middle Name

2. Mother Name KOKANT SUSHILA SHAMLAL

3. Father Name KOKANT SHAMLAL LONDHAN

4. Date of Birth 01/05/1997

5. Caste : SC/ST/NT/SBC/OBC/OPEN ST

6. Medium : Marathi / English Marathi

7. Present class MSW-Ith year

8. Permanent Address AT: Balgomezi, Post Dhekwad, Tal, Dist Nandurbar

(With Phone / Cell No.) 7507132966 / 9511635106

[Signature]
Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - <i>child counseling</i> |
|----------------|------------------|------------------|--------------------|---|
| <i>C10/271</i> | <i>13/9/2019</i> | <i>RS-600/-</i> | <i>[Signature]</i> | Roll No. Reg. No. Year <i>2019-20</i> |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in child Counseling

for the Session 2019-2020

The necessary information for the admission is given below

- 1 Name in full - Marathe Komal Bhagwan.
(In Block Letters) Surname Name Middle Name
2. Mother Name Nirmala Bhagwan Marathe
3. Father Name Bhagwan Shankar Marathe
4. Date of Birth 8/11/1998
5. Caste : SC/ST/NT/SBC/OBC/OPEN open
6. Medium : Marathi / English Marathi
7. Present class Bsw - III
8. Permanent Address Gadegaon post. Neri, Jalgaon.
(With Phone / Cell No.) 7507109461.

Komal
Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - <u>child counselling</u> |
|----------------|-----------------|------------------|--------------------|---|
| <u>c10/299</u> | <u>2019/19</u> | <u>Rs. 500/-</u> | <u>[Signature]</u> | Roll No. Reg. No. Year <u>2019-20</u> |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk _____ Co-ordinate _____ Principal _____

To,
 The Principal
 Loksevak Madhukarrao Chaudhari
 College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in Child Counseling

_____ for the Session 2019-2020

The necessary information for the admission is given below

- 1 Name in full - Pavdeshi Shubham Suresh
 (In Block Letters) Surname Name Middle Name
2. Mother Name Pavdeshi Jayabai Suresh
3. Father Name Pavdeshi Suresh Gulchand
4. Date of Birth 08/09/1997
5. Caste : SC/ST/NT/SBC/OBC/OPEN OBC
6. Medium : Marathi / English Marathi
7. Present class yes
8. Permanent Address At. Shahapura Tal. Pachora Dist. Jalgaon
 (With Phone / Cell No.) 9172429563

[Signature]
 Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - <u>child counseling</u> |
|-----------------|-------------------|------------------|--------------------|---|
| <u>c/10/265</u> | <u>07/09/2019</u> | <u>RS.600/-</u> | <u>[Signature]</u> | Roll No. Reg. No. Year <u>2019-20</u> |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in CHILD

COUNSELING for the Session 2019-2020

The necessary information for the admission is given below

- 1 Name in full - PATIL VAISHALI PRAKASH
(In Block Letters) Surname Name Middle Name
2. Mother Name PATIL BHARTI PRAKASH
3. Father Name PATIL PRAKASH CHINDU
4. Date of Birth 06-02-1998
5. Caste : SC/ST/NT/SBC/OBC/OPEN NT - A
6. Medium : Marathi / English MARATHI
7. Present class MSW - I YEAR
8. Permanent Address A/P VITNEAR
(With Phone / Cell No.) 9309811023

[Signature]
Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - BSW III <i>Child counseling</i> |
|------------|-----------------|------------------|-----------|--|
| 276 | 13-09-2019 | 500 | <i>AB</i> | Roll No. <i>22</i> |
| 277 | | 500 | <i>AB</i> | Reg. No. |
| | | | | Year 2019/20 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon

Respected Sir,

I requested for the admission to Certificate Course in child

Counseling for the Session 2019-2020

The necessary information for the admission is given below

- 1 Name in full - Pawar Bharati chhotiram
(In Block Letters) Surname Name Middle Name
2. Mother Name Saku
3. Father Name chhotiram
4. Date of Birth 02/11/1999
5. Caste : SC/ST/NT/SBC/OBC/OPEN ST
6. Medium : Marathi / English Marathi
7. Present class BSW III
8. Permanent Address At: Punyachapada Po: Dembhe
(With Phone / Cell No.) Pd. Sakri Di - Dhule 9359841881

BPawar
Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Roll No. | Date of Payment | Amount Deposited | Signature | Class - Roll No. Reg. No. Year |
|----------|-----------------|------------------|-----------|---|
| 040 | 22/08/19 | 300/- | | |

Members of the Selection Committee: The candidate named above is/is not recommended for admission

Admission Clerk

Co-ordinator

Principal

To
 The Principal
 College of Social Work, Jalgaon



Respected Sir,
 I requeste

for the admission to Certificate Course in Certificate Course in
Child Counseling for the Session 2019-2020.

The necessary information for the admission is given below

1. Name in full - Pooja Shilant Poochinath
 (In Block Letters) Surname Name Middle Name

2. Mother Name Vimalbhai

3. Father Name Babinath

4. Date of Birth 15 Aug 1997

5. Cast : SC/ST/NT/SBC/OBC/OPEN NT

6. Medium : Marathi / English Marathi

7. Present class BSW - III

8. Permanent Address At. pa. Kherdgaon Tal. Erandol Dist. Jalgaon.

(With Phone / Call No.) 9875636275

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - <u>Child Counseling</u> |
|----------------|-------------------|------------------|--------------------|---|
| <u>C10/278</u> | <u>13/11/2019</u> | <u>RS 3000</u> | <u>[Signature]</u> | Roll No. Reg. No. Year <u>2019-20</u> |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in Child Counseling

for the Session 2019-2020

The necessary information for the admission is given below

- 1 Name in full - PAWARA SUNIL ANNA
(In Block Letters) Surname Name Middle Name
2. Mother Name PAWARA DEWARAI ANNA
3. Father Name PAWARA ANNA SAKARYA
4. Date of Birth 01/10/1997
5. Caste : SC/ST/NT/SBC/OBC/OPEN ST
6. Medium : Marathi / English Marathi
7. Present class MSW - I
8. Permanent Address At Gadhdadeo Tal. Shirpur Dist. Dhule
(With Phone / Cell No.) 9075352928 / 762053440

[Signature]
Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- ✓ 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - <u>Child</u> |
|------------|-----------------|------------------|--------------------|---|
| <u>51</u> | <u>16/9/19</u> | <u>600</u> | <u>[Signature]</u> | Roll No. Reg. No. Year <u>19.20</u> |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in Child

Counseling for the Session 2019-2020

The necessary information for the admission is given below

1 Name in full - RATHOD TULASIRAM HARICHAND
(In Block Letters) Surname Name Middle Name

2. Mother Name NYALOBAT

3. Father Name RATHOD HARICHAND DONGARJING

4. Date of Birth 09-10-1986

5. Caste : SC/ST/NT/SBC/OBC/OPEN VJ-A

6. Medium : Marathi / English MARATHI

7. Present class MSW-III SEM

8. Permanent Address AT-SONGAON POST-MHEARDE TAL-CHALISGAON DIST-JALGAON

(With Phone / Cell No.) 8390621951

[Signature]
Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - MSW <i>child counseling</i> |
|------------|-----------------|------------------|--------------------|--|
| C10/268 | 7/9/2019 | RS-600/- | <i>[Signature]</i> | Roll No. <i>501</i> Reg. No. <i>523</i> Year 2019-2020 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
 The Principal
 college of Social Work, Jalgaon



Respected Sir,

I requeste

d for the admission to Certificate Course in child
Counseling for the Session 201 -201

The necessary information for the admission is given below

- 1 Name in full - SATDIVE KARUNA GAUTAM
 (In Block Letters) Surname Name Middle Name
2. Mother Name SATDIVE NARMDA GAUTAM
3. Father Name SATDIVE GAUTAM MOHAN
4. Date of Birth 14/04/1989
5. Caste : SC/ST/NT/SBC/OBC/OPEN SC
6. Medium : Marathi / English MARATHI
7. Present class MSW IInd year
8. Permanant Address PACHASHI NAGAR BHUSAWAL

(With Phone / Cell No.) 9399932930

K. G. Solanki
 Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Roll No. Reg. No. Year 2019-20 |
|-------------|-----------------|------------------|-----------|---|
| c/10/DC/261 | 31/8/2019 | RS-600/- | | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon



Respected Sir,
I requeste

d for the admission to Certificate Course in child counseling

for the Session 2019-2020

The necessary information for the admission is given below

- 1 Name in full - SONAWANE VAISHALI NANABHAI
(In Block Letters) Surname Name Middle Name
2. Mother Name KAMAL NANA SONAWANE
3. Father Name NANA NATHU SONAWANE
4. Date of Birth 04/06/1987
5. Caste : SC/ST/NT/SBC/OBC/OPEN SC
6. Medium : Marathi / English Marathi
7. Present class MSW-I
8. Permanant Address plot no. 2 Ishwar colony Jalgaon
(With Phone / Cell No.) 7719009889 / 9765538282

Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class <u>Child Counseling</u> |
|------------|-----------------|------------------|-----------|---|
| 110/269 | 7/9/2019 | ₹ 600/- | | Roll No. Reg. No. Year <u>2019-20</u> |

Remarks of the Selection Committee The candidate named above is / is not recommended for admission

Admission Clerk

Co-ordinator

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in child

Counseling for the Session 2019-2020

The necessary information for the admission is given below

- 1 Name in full - SURYAVANSHI SHITAL RAMBHAU
(In Block Letters) Surname Name Middle Name
2. Mother Name SURYAVANSHI MENA RAMBHAU
3. Father Name SURYAVANSHI RAMBHAU PIRAJI
4. Date of Birth 17/02/1997
5. Caste : SC/ST/NT/SBC/OBC/OPEN SC
6. Medium : Marathi / English MARATHI
7. Present class M-S-W-II
8. Permanent Address AT- POST- MHAISWADE TAL- MALKAPUR
7498 47 1395 DIST- BULDHANA

(With Phone / Cell No.)

Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - <u>Child counseling</u> |
|------------|-----------------|------------------|--------------------|--|
| 295 | 12/9/19 | 500 | <i>[Signature]</i> | Roll No. <u>18</u> Reg. No. Year - 2019-20 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in child counseling

for the Session 2019-2020

The necessary information for the admission is given below

- 1 Name in full - SORYAWANSHI ARCHANA VASANT
(In Block Letters) Surname Name Middle Name
2. Mother Name SORYAWANSHI KALYANI VASANT
3. Father Name SORYAWANSHI VASANT KASHINATH
4. Date of Birth 23/09/97
5. Caste : SC/ST/NT/SBC/OBC/OPEN OBC
6. Medium : Marathi / English MARATHI
7. Present class M.S.W - II year
8. Permanent Address 2215 K.C. PARK, KANALADA, ROAD
(With Phone / Cell No.) SHIVAJI NAGAR JAL. (8411938063)

[Signature]
Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- ↳ 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - <u>Child Counseling</u> |
|------------|-----------------|------------------|-----------|---|
| 264 | 5/11/19 | 600/- | | Roll No. <u> </u> Reg. No. <u> </u> Year <u>2019-20</u> |

Remarks of the Selection Committee The candidate named above is/is not recommended for admission

Admission Clerk _____ Co-ordinator _____ Principal _____

To,
 The Principal
 college of Social Work, Jalgaon



Respected Sir,
 I requeste

d for the admission to Certificate Course in Child Counseling
 _____ for the Session 2019-2020

The necessary information for the admission is given below

- 1 Name in full - Tadavi Sanjana Arman
(In Block Letters) Surname Name Middle Name
2. Mother Name Tadavi Bekha Arman
3. Father Name Tadavi Saa Arman Manvar
4. Date of Birth 27/01/1999
5. Caste : SC/ST/NTS/BC/OB/OPEN
6. Medium : Marathi / English
7. Present class MSW - I
8. Permanent Address AT. Post Chunchale tal. Yawal Dist Jalgaon
(With Phone / Cell No.) 9028549084

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - <u>child counselling</u> |
|------------|-----------------|------------------|-----------|--------------------------------------|
| 273 | 13-9-2019 | 800/- | | Roll No. Reg. No. Year 2019-20 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon



Respected Sir,
I requeste

d for the admission to Certificate Course in child counselling

_____ for the Session 2019-2020

The necessary information for the admission is given below

- 1 Name in full - TAYADE POOJA BHAGWAT
(In Block Letters) Surname Name Middle Name
2. Mother Name PRAMILABAI BHAGWAT TAYADE
3. Father Name BHAGWAT RATAN TAYADE
4. Date of Birth 14/3/1998
5. Caste : SC/ST/NT/SBC/OBC/OPEN SC
6. Medium : Marathi / English MARATHI
7. Present class MSW- I YEAR
8. Permanent Address SHANKARRAO NAGAR 28B.N.1 JALGAON
(With Phone / Cell No.) 9307275860

Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - <u>child</u> |
|----------------|------------------|------------------|--------------------|---|
| <u>C10/307</u> | <u>21/9/2019</u> | <u>Rs. 4000</u> | <u>[Signature]</u> | Roll No. Reg. No. Year <u>2019-20</u> |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in child counseling

for the Session 2019-2020

The necessary information for the admission is given below

- 1 Name in full - Thakare Savita Eknath
(In Block Letters) Surname Name Middle Name
2. Mother Name Kamalbai Eknath Thakare
3. Father Name Eknath Atma Ram Thakare
4. Date of Birth 30/10/1999
5. Caste : SC/ST/NT/SBC/OBC/OPEN ST
6. Medium : Marathi / English Marathi
7. Present class M.S.W I year
8. Permanent Address at penhalipadd po chudavel Tal sakei Dist Dhule
(With Phone / Cell No.) 7887765234

[Signature]
Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- ✓ 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class (Child Care) |
|------------|-----------------|------------------|-----------|-----------------------------------|
| 53 | 16/9/19 | 50/- | | Roll No. Reg. No. Year 1920 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
 The Principal
 Loksevak Madhukarrao Chaudhari
 College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in child counseling

_____ for the Session 2019-2020:

The necessary information for the admission is given below

- 1 Name in full - VASAVE VILAS BIJYA
 (In Block Letters) Surname Name Middle Name
2. Mother Name VASAVE JAMANABAI BIJYA
3. Father Name VASAVE BIJYA PUNYA
4. Date of Birth 12/04/1998
5. Caste : SC/ST/NT/SBC/OBC/OPEN ST
6. Medium : Marathi / English Marathi
7. Present class M.S.K - 5th years
8. Permanent Address at odipast morambal tal Akkal ku D. D. Nandurbar
 (With Phone / Cell No.) 7588387106

Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - <i>child counselling</i> |
|----------------|-------------------|------------------|--------------------|---|
| <i>c10/262</i> | <i>03/09/2019</i> | <i>Rs.600/-</i> | <i>[Signature]</i> | Roll No. Reg. No. Year <i>2019-20</i> |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk _____ Co-ordinate _____ Principal _____

To,
 The Principal
 college of Social Work, Jalgaon



Respected Sir,
 I requeste

d for the admission to **Certificate Course in *child counselling***

_____ for the Session 2019-2020

The necessary information for the admission is given below

- 1 Name in full - WADEKAR SUREKHA PRASANT
 (In Block Letters) Surname Name Middle Name
2. Mother Name WANKHEDE ASHA LAXMAN
3. Father Name WANKHEDE LAXMAN HIRAMAN
4. Date of Birth 10-10-1992
5. Caste : SC/ST/NT/SBC/OBC/OPEN SC
6. Medium : Marathi / English Marathi
7. Present class MSW - I
8. Permanant Address Bl-No 2 Pl No 71 Gal No 164/2 Datta Chaitany 9 Nayer
Jalgaon
- (With Phone / Cell No.) 9561365640

[Signature]
 Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - <u>child</u> |
|----------------|------------------|------------------|--------------------|---|
| <u>C10/302</u> | <u>21/9/2019</u> | <u>RS 1200/-</u> | <u>[Signature]</u> | Roll No. Reg. No. Year <u>2019-20</u> |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
 The Principal
 Loksevak Madhukarrao Chaudhari
 College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in child counseling

for the Session 2019-2020

The necessary information for the admission is given below

- 1 Name in full - WAGHMARE KAMLESH KESHAV
 (In Block Letters) Surname Name Middle Name
2. Mother Name JAYVANTI
3. Father Name KESHAV
4. Date of Birth 03/01/1999
5. Caste : SC/ST/NT/SBC/OBC/OPEN ST
6. Medium : Marathi / English MARATHI
7. Present class BSW - IIIrd YEAR
8. Permanent Address AT. GAHALE TAL. SURGAHA. DIST. NASHIK
 (With Phone / Cell No.) 7517843548

[Signature]
 Signature of the Applicant

Annexure-A

List of admitted students for Career Oriented Courses under Ordinance 181

- | | |
|-----------------------------------|--|
| 1) Name of the College | - Dhanaji Nana Chaudhari Vidya Prabodhini's Loksevak Madhukarrao Chaudhari College of Social Work , Jalgaon |
| 2) Name of Career Oriented Course | - Certificate Course in Child Counseling |
| 3) Academic Year | - 2020 - 2021 |
| 4) Intake Capacity | - 60 |

| Sr. No. | Full name of the Students | Gender | Category | Education al Qualificati on # | Year of passing Cert./Diploma Course (Applicable only for Diploma & Adv. Diploma Course) | Presently admitted Class (F.Y.,S.Y.,T.Y./P.G. | Remark (If Any) |
|---------|---------------------------|--------|----------|--|--|--|------------------|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| 1 | GAIKWAD RUSHIKESH VIJAY | MALE | SC | | | MSH-2 | |
| 2 | KADAM NAYANA GAMBHIR | FEMALE | ST | | | -11- | |
| 3 | KALE OJASWINI RAJENDRA | FEMALE | NT-C | | | -11- | |
| 4 | KAROSIA NEHA DINESH | FEMALE | SC | | | MSH-37 | |
| 5 | MAHAJAN SHIVANI RAJENDRA | FEMALE | OBC | | | -11- | |
| 6 | PATIL ATHARV VINAY | MALE | OBC | | | BSH-37 | |
| 7 | TAYADE SWATI ANIL | FEMALE | SG- | | | MSH-F7 | |
| 8 | WAGH GAYATRI SANJAY | FEMALE | SBC | | | MSH-57 | |

CERTIFICATE

This is to certify that the documents regarding educational qualifications of the above students have been verified and found correct. The students mentioned in the list are eligible for the admission to the above mentioned course as per university ordinance-181.

Co-ordinator

Mobile No. -

Annexure-A

List of admitted students for Career Oriented Courses under Ordinance 181

- 1) Name of the College - Dhanaji Nana Chaudhari Vidya Prabodhini's
Loksevak Madhukarrao Chaudhari College of Social Work , Jalgaon
- 2) Name of Career oriented Course - Certificate Course in Human Resource Management
- 3) Academic Year - 2019 - 2020
- 4) Intake Capacity - 60

| Sr. No. | Full name of the Students | Gender | Category | Educational Qualification # | Year of passing. Cert./Diploma Course (Applicable only for Diploma & Adv. Diploma Course) | Presently admitted Class (F.Y.,S.Y., T.Y./P.G. | Remark (If Any) |
|---------|----------------------------|--------|----------|-----------------------------|---|---|------------------|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| 1 | DHANGAR NIKHIL HIRALAL | MALE | NT-C | | | | |
| 2 | GAIKWAD RUSHIKESH VIJAY | MALE | SC | | | MSH-FY | |
| 3 | JADHAV TEJASWITA MUKUND | FEMALE | OBC | | | -11- | |
| 4 | JAWALE MANASI PRAVIN | FEMALE | OBC | | | -11- | |
| 5 | NIKAM PALLAVI GIRDHAR | FEMALE | SC | | | MSH-SY | |
| 6 | SONAWANE VAISHALI NANABHAU | FEMALE | SC | | | -11- | |
| 7 | WANI RUSHIKESH SATISH | MALE | OBC | | | MSH-FY | |

CERIFICATE

This is to certify that the documents regarding educational qualifications of the above students have been verified and found correct. The students mentioned in the list are eligible for the admission to the above mentioned course as per university ordinance-181.

Co-ordinator
Mobile No. -

Annexure-A

Admitted students for Career Oriented Courses under Ordinance 181
of the College

- Dhanaji Nana Chaudhari Vidya Prabodhini's Loksevak Madhukarrao Chaudhari College of Social Work, Jalgaon
- Certificate Course in N.G.O. Management
- 2020-2021
- 60



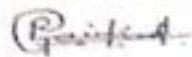
Name of Career oriented Course
Academic Year
Intake Capacity



| Sr. No. | Full name of the Students | Gender | Category | Educational Qualification # | Year of passing. Cert./Diploma Course (Applicable only for Diploma & Adv. Diploma Course) | Presently admitted Class (F.Y.,S.Y.,T.Y./P.G.) | Remarks (If Any) |
|---------|------------------------------|--------|----------|-----------------------------|---|--|------------------|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| 1 | BADGUJAR RENUKA DNYANESHWAR | FEMALE | OBC | | | | |
| 2 | BHALERAO VISHWAPRABHA SHARAD | FEMALE | SC- | | | | MISH-FY |
| 3 | JAWALE MANASI PRAVIN | FEMALE | OBC | | | | -11- |
| 4 | KAROSIYA NEHA DINESH | FEMALE | SC | | | | MISH-SY |
| 5 | MAHAJAN SHIVANI RAJENDRA | FEMALE | OBC | | | | -11- |
| 6 | PATIL ATHARVA VINAY | MALE | OBC | | | | MISH-SY |
| 7 | PATIL CHAITALI ASHOK | FEMALE | OBC | | | | MISH-SY |
| 8 | PATIL NILIMA RAVAN | FEMALE | OBC | | | | |
| 9 | RAJPUT VIJAY NAVALSING | MALE | EWS | | | | |
| 10 | SONAWANE VAISHALI NANABHAU | FEMALE | SC | | | | |
| 11 | TADVI MUSKAN IBRAHIM | FEMALE | ST | | | | |
| 12 | WANKHEDE SANJANA KISHOR | FEMALE | OBC | | | | |

CERTIFICATE

This is to certify that the documents regarding educational qualifications of the above students have been verified and found correct. The students mentioned in the list are eligible for the admission to the above mentioned course as per university ordinance-181.

Co-ordinator

| | | | |
|---|---|-----------------------------|---|
|  | LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK Jalgaon | College Code LMCCSW |  |
| For College use only | Course Applied to: CC CHILD COUNS. Admission Date: 24/01/21 | Registration No. 1024872 |  |
| 01. Personal Information Section | | | |
| | LAST NAME | FIRST NAME | MIDDLE NAME |
| Name of the Student | GAIKWAD | RUSHIKESH | VJAY |
| Father's Name | VJAY | | |
| Mother's Name : | SHOBHA | | |
| Marital Status : UnMarried | Saral No. : | | |
| Date of Birth : 28/03/1999 | Gender : Male | | |
| Place of Birth : JALGAON | Blood Group : B+ | | |
| Grandfather Name : | Native Place : | | |
| Voter ID Card No. : | Organ Donor : NO | Medium : Marathi | |
| Bank Name : | Account No. : | Transaction Type : ONLINE | |
| Religion : HINDU | Citizenship of : Indian | U-DISE No. : | |
| Aadhar Card No. : 697457953438 | Driving Licence No. : | Minority: NO | |
| 02. Address Details | | | |
| Address for Correspondence: | Mazid Parer Samata Nagar | | Pin Code : 425001 |
| State : MAHARASHTRA | District : JALGAON | Tehsil : JALGAON | City : JALGAON |
| Permanent Address | Mazid Parer Samata Nagar | | Pin Code : 425001 |
| State : MAHARASHTRA | District : JALGAON | Tehsil : JALGAON | City : JALGAON |
| 03. Contact Details | | | |
| Student Phone : | Parent Phone : | | |
| Student Mobile No. : 9975365772 | Student Email Id: rushikeshgaikwad280399@gmail.com | | |
| 04. Legal Reservation Information Section | | | |
| Domestic State : | Type of Category : | Caste Category : SC | |
| Sub Caste : MAJAR-17 | Phy. Handicapped : | | |
| Caste Certificate No. : | Learning Disability No. : | | |
| 05. Social Reservation (Special Category) Information Section | | | |

| | | | | |
|---|---|-------------------------------------|-----------------------------|--|
|  | LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK Jalgaon | | College Code LMCCSW |  |
| | For College use only | Course Applied to: CC CHILD COURSE. | Registration No. 1023394 | |
| Admission Date : | | | | |

01. Personal Information Section

| LAST NAME | FIRST NAME | MIDDLE NAME |
|---|------------|-------------|
| KADAM | NAYANA | GAMBHIR |
| Father's Name : GAMBHIR | | |
| Mother's Name : SUNITA | | |
| Marital Status : Married | | |
| Date of Birth : 13/03/1994 | | |
| Place of Birth : JALGAON | | |
| Grandfather Name : Saral No. : | | |
| Gender : Female | | |
| Blood Group : O+ | | |
| Native Place : | | |
| Voter ID Card No. : Organ Donor : NO Medium : Marathi | | |
| Bank Name : Account No. : Transaction Type : ONLINE | | |
| Religion : HINDU Citizenship of : Indian U-DISE No. : | | |
| Aadhar Card No. : 568876125090 Driving Licence No. : Minority: NO | | |

02. Address Details

| | | | |
|-----------------------------|------------------------|------------------------|-------------------|
| Address for Correspondence: | | walmik nagar, chinhol, | Pin Code : 425306 |
| State : MAHARASHTRA | District : JALGAON | Tehsil : MUKTAINAGAR | City : CHANGDEV |
| Permanent Address | walmik nagar, chinhol, | | Pin Code : 425306 |
| State : MAHARASHTRA | District : JALGAON | Tehsil : MUKTAINAGAR | City : CHANGDEV |

03. Contact Details

| | |
|---------------------------------|--|
| Student Phone : | Parent Phone : |
| Student Mobile No. : 9172089665 | Student Email Id : nayanaathakur1993@gmail.com |

04. Legal Reservation Information Section

| | | |
|------------------------------|---------------------------|---------------------|
| Domicile State : MAHARASHTRA | Type of Category : | Caste Category : ST |
| Sub Caste : THAKUR | Phy. Handicapped : | |
| Caste Certificate No. : | Learning Disability No. : | |

05. Social Reservation (Special Category) Information Section

| |
|--|
| |
|--|



**ಕರ್ನಾಟಕ ಸರ್ಕಾರದ ಅಧೀನದಲ್ಲಿ
ಕರ್ನಾಟಕ ಸರ್ಕಾರದ ಕಾಲೇಜು**

ಕರ್ನಾಟಕ ಸರ್ಕಾರದ
ಕಾಲೇಜು



ಅಭ್ಯರ್ಥಿ

ಈ ಕಾಲೇಜು
ನಂ. 1001

ವಿಷಯ: ಇಂಜಿನಿಯರಿಂಗ್
ಅಭ್ಯರ್ಥನ ಹೆಸರು

ರಜಿಸ್ಟ್ರೇಷನ್ ನಂ.
1001001

ಅಭ್ಯರ್ಥಿ

A. Personal Information Section

| | FIRST NAME | MIDDLE NAME | LAST NAME |
|---------------------|---------------------|------------------|---------------|
| Name of the Student | RAJ | SHANKAR | SHANKAR |
| Father's Name | SHANKAR | | |
| Address & Name | 1001001 | | |
| Marital Status | Unmarried | Serial No. | |
| Date of Birth | 10/07/1999 | Gender | Female |
| Place of Birth | CHANNarayana | Blood Group | B+ |
| Guardian Name | | | |
| Voter ID Card No. | Organ Donor | Yes | Medium Height |
| Bank Name | Account No. | Transaction Type | |
| Religion | Citizenship of | Indian | |
| Aadhar Card No. | Driving License No. | None | |

B. Address Details

| | | | | | |
|----------------------------|--|----------|----------|--------|--------------|
| Address for Correspondence | AP AHH VADDEVI HADAR SATTARA TAL CHANNARAYANA DIST BELGACH | | Pin Code | 590001 | |
| State | KARNATAKA | District | BELGACH | Tehsil | CHANNARAYANA |
| City | CHANNARAYANA | | | | |
| Permanent Address | AP AHH VADDEVI HADAR SATTARA TAL CHANNARAYANA DIST BELGACH | | Pin Code | 590001 | |
| State | KARNATAKA | District | BELGACH | Tehsil | CHANNARAYANA |
| City | CHANNARAYANA | | | | |

C. Contact Details

| | |
|--------------------------------|---|
| Student Phone | Parent Phone |
| Student Mobile No.: 9075401530 | Student Email Id: sspwinkale20713@gmail.com |

D. Legal Reservation Information Section

| | | | | |
|-------------------------|---------------------------|------------------|-----------------|----|
| Board/State | KARNATAKA | Type of Category | Castes Category | SC |
| Sub Castes | DEKANAR | Phy. Handicapped | | |
| caste Certificate No. : | Learning Disability No. : | | | |

E. Social Reservation (Special Category) Information Section


**LOKSEVAK MADHUKARRAO CHAUDHARI
COLLEGE OF SOCIAL WORK**

Jalgaon

College Code
:LMCCSWFor College
use only

Course Applied to: CC CHILD COUNS.

Registration No.

1019436

Admission Date :



01. Personal Information Section

| | LAST NAME | FIRST NAME | MIDDLE NAME |
|--------------------------------|--------------------------|---------------------------|-------------|
| Name of the Student | KAROSIA | NEHA | DINESH |
| Father's Name | KAROSIYA DINESH HARCHAND | | |
| Mother's Name : | SHOBHA | | |
| Marital Status : UnMarried | SaraI No. : | | |
| Date of Birth : 05/03/1999 | Gender : Female | | |
| Place of Birth : JALGAON | Blood Group : AB+ | | |
| Grandfather Name : | Native Place : | | |
| Voter ID Card No. : | Organ Donar : NO | Medium : Marathi | |
| Bank Name : | Account No. : | Transaction Type : ONLINE | |
| Religion : HINDU | Citizenship of : Indian | U-DISE No. : | |
| Aadhar Card No. : 652574407809 | Driving Licence No. : | Minority: NO | |

02. Address Details

| | | | |
|-----------------------------|------------------------------|------------------|-------------------|
| Address for Correspondence: | shani peth guru nanak manidr | | Pin Code : 425001 |
| State : MAHARASHTRA | District : JALGAON | Tehsil : JALGAON | City : JALGAON |
| Permanent Address | shani peth guru nanak manidr | | Pin Code : 425001 |
| State : MAHARASHTRA | District : JALGAON | Tehsil : JALGAON | City : JALGAON |

03. Contact Details

| | |
|--------------------------------|---------------------------------------|
| Student Phone : | Parent Phone : |
| Student Mobile No.: 9623255557 | Student Email Id: nehakao27@gmail.com |

04. Legal Reservation Information Section

| | | |
|-------------------------|---------------------------|---------------------|
| Domicile State : | Type of Category : | Caste Category : SC |
| Sub Caste : Bhangi | Phy. Handicapped : | |
| Caste Certificate No. : | Learning Disability No. : | |

05. Social Reservation (Special Category) Information Section

**LOKSEVAK MADHUKARRAO CHAUDHARI
COLLEGE OF SOCIAL WORK**

Jalgaon

College Code
:LMCCSWFor College
use only

Course Applied to: CC CHILD COUNS.

Registration No.

Admission Date 29/01/2021

1019566

01. Personal Information Section

| | LAST NAME | FIRST NAME | MIDDLE NAME |
|--------------------------------|-------------------------|---------------------------|-------------|
| Name of the Student | MAHAJAN | SHIVANI | RAJENDRA |
| Father's Name | RAJENDRA DULA MAHAJAN | | |
| Mother's Name : | PRAMILA | | |
| Marital Status : UnMarried | Saral No. : | | |
| Date of Birth : 12/08/1998 | Gender : Female | | |
| Place of Birth : ERANDOL | Blood Group : O+ | | |
| Grandfather Name : | Native Place : Erandol | | |
| Voter ID Card No. : | Organ Donor : NO | Medium : Marathi | |
| Bank Name : | Account No. : | Transaction Type : ONLINE | |
| Religion : HINDU | Citizenship of : Indian | U-DISE No. : | |
| Aadhar Card No. : 883227994305 | Driving Licence No. : | Minority: NO | |

02. Address Details

| | | |
|-----------------------------|--------------------|-------------------|
| Address for Correspondence: | Padmal Park | Pin Code : 425109 |
| State : MAHARASHTRA | District : JALGAON | Tehsil : ERANDOL |
| City : ERANDOL | | |
| Permanent Address | Padmal Park | Pin Code : 425109 |
| State : MAHARASHTRA | District : JALGAON | Tehsil : ERANDOL |
| City : ERANDOL | | |



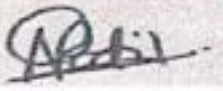
03. Contact Details

| | |
|--------------------------------|---|
| Student Phone : | Parent Phone : |
| Student Mobile No.: 9307721922 | Student Email Id: mrshivani1998@gmail.com |

04. Legal Reservation Information Section

| | | |
|-------------------------|---------------------------|----------------------|
| Domicile State : | Type of Category : | Caste Category : OBC |
| Sub Caste : FUL MALI | Phy. Handcapped : | |
| Caste Certificate No. : | Learning Disability No. : | |

05. Social Reservation (Special Category) Information Section

| | | | | |
|---|--|--|-----------------------------|--|
|  | LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK Jalgaon | | College Code :LMCCSW |   |
| | For College use only | Course Applied to: CC CHILD COUNS. Admission Date: 09/12/21 | Registration No. 1023791 | |

01. Personal Information Section

| | LAST NAME | FIRST NAME | MIDDLE NAME |
|--------------------------------|-------------------------|---------------------------|-------------|
| Name of the Student | PATIL | ATHARV | VINAY |
| Father's Name | VINAY | | |
| Mother's Name : | VARSHA | | |
| Marital Status : UnMarried | Saral No. : | | |
| Date of Birth : 24/08/2001 | Gender : Male | | |
| Place of Birth : JALGAON | Blood Group : A+ | | |
| Grandfather Name : | Native Place : | | |
| Voter ID Card No. : | Organ Donar : NO | Medium : Marathi | |
| Bank Name : | Account No. : | Transaction Type : ONLINE | |
| Religion : HINDU | Citizenship of : Indian | U-DISE No. : | |
| Aadhar Card No. : 225286828210 | Driving Licence No. : | Minority: NO | |

02. Address Details

| | | | |
|-----------------------------|--------------------------------|------------------|-------------------|
| Address for Correspondence: | 35,shastri nagar ramanand road | | Pin Code : 425001 |
| State : MAHARASHTRA | District : JALGAON | Tehsil : JALGAON | City : JALGAON |
| Permanent Address | 35,shastri nagar ramanand road | | Pin Code : 425001 |
| State : MAHARASHTRA | District : JALGAON | Tehsil : JALGAON | City : JALGAON |



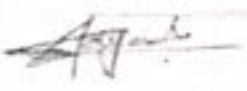
03. Contact Details

| | |
|--------------------------------|---|
| Student Phone : | Parent Phone : |
| Student Mobile No.: 7666682404 | Student Email Id: patilatharvav@gmail.com |

04. Legal Reservation Information Section

| | | |
|------------------------------|---------------------------|----------------------|
| Domicile State : MAHARASHTRA | Type of Category : | Caste Category : OBC |
| Sub Caste : LAVA PATIDAR | Phy. Handicapped : | |
| Caste Certificate No. : | Learning Disability No. : | |

05. Social Reservation (Special Category) Information Section

| | | | | |
|---|--|---|-----------------------------|---|
|  | LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK Jalgaon | | College Code :LMCCSW |   |
| | For College use only | Course Applied to: CC CHILD COUNS. Admission Date : 12/12/21 | Registration No. 1021016 | |

01. Personal Information Section

| | LAST NAME | FIRST NAME | MIDDLE NAME |
|--------------------------------|-------------------------|---------------------------|-------------|
| Name of the Student | TAYADE | SWATI | ANIL |
| Father's Name | ANIL | | |
| Mother's Name : | USHA | | |
| Marital Status : UnMarried | Saral No. : | | |
| Date of Birth : 22/05/1995 | Gender : Female | | |
| Place of Birth : MUKTAINAGAR | Blood Group : AB+ | | |
| Grandfather Name : | Native Place : | | |
| Voter ID Card No. : | Organ Donar : YES | Medium : Marathi | |
| Bank Name : | Account No. : | Transaction Type : ONLINE | |
| Religion : HINDU | Citizenship of : Indian | U-DISE No. : | |
| Aadhar Card No. : 248076242180 | Driving Licence No. : | Minority: NO | |

02. Address Details

| | | | |
|-----------------------------|--|------------------|-------------------|
| Address for Correspondence: | 451/3 PLOT NO 19 NITYNAD NAGAR MOHADI ROAD JALGAON | | Pin Code : 425001 |
| State : MAHARASHTRA | District : JALGAON | Tehsil : JALGAON | City : JALGAON |
| Permanent Address | 451/3 PLOT NO 19 NITYNAD NAGAR MOHADI ROAD JALGAON | | Pin Code : 425001 |
| State : MAHARASHTRA | District : JALGAON | Tehsil : JALGAON | City : JALGAON |




03. Contact Details

| | |
|--------------------------------|---|
| Student Phone : | Parent Phone : 7875590578 |
| Student Mobile No.: 7499255375 | Student Email Id: swatitayade96@gmail.com |

04. Legal Reservation Information Section

| | | |
|------------------------------|---------------------------|---------------------|
| Domicile State : MAHARASHTRA | Type of Category : | Caste Category : SC |
| Sub Caste : MAHAR-37 | Phy. Handicapped : NO | |
| Caste Certificate No. : | Learning Disability No. : | |

05. Social Reservation (Special Category) Information Section

| | | | | |
|---|---|--|-----------------------------|---|
|  | LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK Jalgaon | | College Code :LMCCSW |   |
| | For College use only | Course Applied to: CC CHILD COUNS. Admission Date : | Registration No. 1019660 | |

01. Personal Information Section

| | LAST NAME | FIRST NAME | MIDDLE NAME |
|--------------------------------|-------------------------|---------------------------|-------------|
| Name of the Student | WAGH | GAYATRI | SANJAY |
| Father's Name | SANJAY BHAGWAT WAGH | | |
| Mother's Name : | SARALA | | |
| Marital Status : UnMarried | Sarat No. : | | |
| Date of Birth : 30/04/1997 | Gender : Female | | |
| Place of Birth : JALGAON | Blood Group : O+ | | |
| Grandfather Name : | Native Place : | | |
| Voter ID Card No. : | Organ Donar : NO | Medium : Marathi | |
| Bank Name : | Account No. : | Transaction Type : ONLINE | |
| Religion : HINDU | Citizenship of : Indian | U-DISE No. : | |
| Aadhar Card No. : 321339687819 | Driving Licence No. : | Minority: NO | |

02. Address Details

| | | | |
|-----------------------------|--|------------------|-------------------|
| Address for Correspondence: | gat no25 nimkhedi shivar shivdham mandir | | Pin Code : 425001 |
| State : MAHARASHTRA | District : JALGAON | Tehsil : JALGOAN | City : JALGAON |
| Permanent Address | gat no25 nimkhedi shivar shivdham mandir | | Pin Code : 425001 |
| State : MAHARASHTRA | District : JALGAON | Tehsil : JALGOAN | City : JALGAON |

03. Contact Details

| | |
|--------------------------------|---|
| Student Phone : | Parent Phone : |
| Student Mobile No.: 9359328909 | Student Email Id: waghgayatri76@gmail.com |

04. Legal Reservation Information Section

| | | |
|--------------------------|---------------------------|----------------------|
| Domicile State : | Type of Category : | Caste Category : SBC |
| Sub Caste : mahadev koli | Phy. Handicapped : | |
| Caste Certificate No. : | Learning Disability No. : | |

05. Social Reservation (Special Category) Information Section

Annexure-A

List of admitted students for Career Oriented Courses under Ordinance 181

1) Name of the College

- Dhanaji Nana Chaudhari Vidya Prabodhini's
Loksevak Madhukarrao Chaudhari College of Social Work , Jalgaon

2) Name of Career oriented Course

- Certificate Course in Child Counseling

3) Academic Year

- 2020 - 2021

4) Intake Capacity

- 60

| Sr. No. | Full name of the Students | Gender | Category | Educational Qualification # | Year of passing- Cert./Diploma Course (Applicable only for Diploma & Adv. Diploma Course) | Presently admitted Class (F.Y.,S.Y.,T.Y./P.G. | Remark (If Any) |
|---------|---------------------------|--------|----------|-----------------------------|---|--|------------------|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| 1 | GAIKWAD RUSHIKESH VIJAY | MALE | SC | XII | | | |
| 2 | KADAM NAYANA GAMBHIR | FEMALE | ST | XII | | | |
| 3 | KALE OJASWINI RAJENDRA | FEMALE | NT-C | XII | | | |
| 4 | KAROSIA NEHA DINESH | FEMALE | SC | XII | | | |
| 5 | MAHAJAN SHIVANI RAJENDRA | FEMALE | OBC | XII | | | |
| 6 | PATIL ATHARV VINAY | MALE | OBC | XII | | | |
| 7 | TAYADE SWATI ANIL | FEMALE | SC | XII | | | |
| 8 | WAGH GAYATRI SANJAY | FEMALE | SBC | XII | | | |

CERIFICATE

This is to certify that the documents regarding educational qualifications of the above students have been verified and found correct. The students mentioned in the list are eligible for the admission to the above mentioned course as per university ordinance-181.

Co-ordinator

Mobile No. -



**LOKSEVAK MADHUKARRAO
CHAUDHARI COLLEGE OF
SOCIAL WORK, JALGAON**

**Application for
Admission to CC
CHILD COUNS.
Session 2020-2021
Application No. :
2908938**



Pratik A

Applicant's Personal Details

| | | | | |
|----------------------------|----------------|-------------------|--------------------|----------------------|
| Name of the Student | Surname | First name | Father name | Mother's Name |
| | GAIKWAD | RUSHIKESH | VIJAY | SHOBHA |

| | | | |
|---|---------------|--|---------------|
| Student Name(HINDI) | | Place Of Birth | JALGAON |
| Date of Birth | 28/03/1999 | Birth District | Please Select |
| Birth State | Please Select | Voter Id | |
| Birth Tehsil | JALGAON | Blood Group | B+ |
| Marital Status | UNMARRIED | Gender | MALE |
| Religion | HINDU | Aadhaar card Number | 697457953438 |
| Nationality | INDIAN | Passport Number | |
| Mother Tongue | MARATHI | Employment Status | Unemployed |
| EID Number | | Eligibility No. | |
| NCC/NSS | NO | Sub Caste | MAHAR-37 |
| Caste Category | SC | PRN Number | |
| Enrollment Number | | Is Orphan | NO |
| Handicap | | Udise No. | |
| Serai No. | | Student has internet connectivity | NO |
| Student has a Desktop/ Laptop/ Smart phone | NO | | |
| Municipal Ward | | | |

| | | | |
|--------------------------------|-------|----------------------------|------------|
| Father's/Husband's Name | VIJAY | Gross Annual Income | 132,000.00 |
| Occupation | | | |
| Mobile | | | |
| Office Address | | | |

| | | |
|-----------------------------|--------------------|--|
| Current Exam Details | Roll Number | |
| Section | | |
| Subject | | |

| | | | |
|----------------------------------|----------------------------|--------------------------|---------|
| Address of Correspondence | Masjid Parler Samata Nagar | | |
| Address | | | |
| State | MAHARASHTRA | District | JALGAON |
| Tehsil | JALGAON | City/Town/Village | JALGAON |
| Pincode | 425001 | | |



LOKSEVAK MADHUKARRAO
CHAUDHARI COLLEGE OF
SOCIAL WORK, JALGAON

Application for
Admission to CC
CHILD COUNS.
Session 2020-2021
Application No. :
2890913



Applicant's Personal Details

| Name of the Student | Surname | First name | Father name | Mother's Name |
|---------------------|---------|------------|-------------|---------------|
| | KADAM | NAYANA | GAMBHIR | SUNETA |

| | | | |
|---|-------------|--------------------------------------|--------------|
| Student Name(HINDI) | | | |
| Date of Birth | 13/03/1994 | Place Of Birth | JALGAON |
| Birth State | MAHARASHTRA | Birth District | JALGAON |
| Birth Tehsil | JALGAON | Voter Id | |
| Marital Status | MARRIED | Blood Group | O+ |
| Religion | HINDU | Gender | FEMALE |
| Nationality | INDIAN | Aadhaar card Number | 568876125090 |
| Mother Tongue | MARATHI | Passport Number | |
| ETD Number | | Employment Status | Unemployed |
| NCC/NSS | NO | Eligibility No. | |
| Caste Category | ST | Sub Caste | THAKUR |
| Enrollment Number | | PRN Number | |
| Handicap | | Is Orphan | NO |
| Saral No. | | Udise No. | |
| Student has a Desktop/ Laptop/ Smart phone | NO | Student has internet connectivity | NO |
| Municipal Ward | | | |

| | | | |
|-------------------------|---------|---------------------|------------|
| Father's/Husband's Name | GAMBHIR | | |
| Occupation | | Gross Annual Income | 300,000.00 |
| Mobile | | | |
| Office Address | | | |

Current Exam Details

| | | | |
|---------|--|-------------|--|
| Section | | Roll Number | |
| Subject | | | |

Address of Correspondence

| | | | |
|---------|------------------------|-------------------|----------|
| Address | walmik nagar, chinhol, | | |
| State | MAHARASHTRA | District | JALGAON |
| Tehsil | MUKTAINAGAR | City/Town/Village | CHANGDEV |
| Pincode | 425306 | | |



**LOKSEVAK MADHUKARRAO
CHAUDHARI COLLEGE OF
SOCIAL WORK, JALGAON**

**Application for
Admission to CC
CHILD COUNS.
Session 2020-2021
Application No. :
2876862**



Applicant's Personal Details

| Name of the Student | Surname | First name | Father name | Mother's Name |
|---------------------|---------|------------|-------------|---------------|
| | KAROSIA | NEHA | DINESH | SHOBHA |

| | | | |
|---|---------------|--------------------------------------|---------------|
| Student Name(HINDI) | | | |
| Date of Birth | 05/03/1999 | Place Of Birth | JALGAON |
| Birth State | Please Select | Birth District | Please Select |
| Birth Tehsil | Jalgaon | Voter Id | |
| Marital Status | UNMARRIED | Blood Group | AB+ |
| Religion | HINDU | Gender | FEMALE |
| Nationality | INDIAN | Aadhaar card Number | 652574407809 |
| Mother Tongue | MARATHI | Passport Number | |
| EID Number | | Employment Status | Unemployed |
| NCC/NSS | NO | Eligibility No. | |
| Caste Category | SC | Sub Caste | Bhangi |
| Enrollment Number | | PRN Number | |
| Handicap | | Is Orphan | NO |
| Saral No. | | Udise No. | |
| Student has a Desktop/ Laptop/ Smart phone | NO | Student has internet connectivity | NO |
| Municipal Ward | | | |

| | | | |
|-------------------------|--------------------------|---------------------|------------|
| Father's/Husband's Name | KAROSIYA DINESH HARCHAND | | |
| Occupation | | Gross Annual Income | 400,000.00 |
| Mobile | | | |
| Office Address | | | |

| Current Exam Details | | | |
|----------------------|--|-------------|--|
| Section | | Roll Number | |
| Subject | | | |

| Address of Correspondence | | | |
|---------------------------|------------------------------|-------------------|---------|
| Address | shani peth guru nanak manidr | | |
| State | MAHARASHTRA | District | JALGAON |
| Tehsil | JALGAON | City/Town/Village | JALGAON |
| Pincode | 425001 | | |

Session 2020-2021



**LOKSEVAK MADHUKARRAO
CHAUDHARI COLLEGE OF
SOCIAL WORK, JALGAON**

**Application for
Admission to CC
CHILD COUNS.
Session 2020-2021
Application No. :
2876796**



Applicant's Personal Details

| Name of the Student | Surname | First name | Father name | Mother's Name |
|---------------------|---------|------------|-------------|---------------|
| | MAHAJAN | SHIVANI | RAJENDRA | PRAMILA |

| | | | |
|---|---------------|--------------------------------------|------------------|
| Student Name(HINDI) | | | |
| Date of Birth | 12/08/1998 | Place Of Birth | ERANDOL |
| Birth State | Please Select | Birth District | Please Select |
| Birth Tehsil | Erandol | Voter Id | |
| Marital Status | UNMARRIED | Blood Group | O+ |
| Religion | HINDU | Gender | FEMALE |
| Nationality | INDIAN | Aadhaar card Number | 883227994305 |
| Mother Tongue | MARATHI | Passport Number | |
| EID Number | | Employment Status | Unemployed |
| NCC/NSS | NO | Eligibility No. | |
| Caste Category | OBC | Sub Caste | FUL MALI |
| Enrollment Number | | PRN Number | 2016015400102444 |
| Handicap | | Is Orphan | NO |
| Saral No. | | Udise No. | |
| Student has a Desktop/ Laptop/ Smart phone | NO | Student has internet connectivity | NO |
| Municipal Ward | | | |

| | | | |
|-------------------------|-----------------------|---------------------|------------|
| Father's/Husband's Name | RAJENDRA DULA MAHAJAN | Gross Annual Income | 400,000.00 |
| Occupation | | | |
| Mobile | | | |
| Office Address | | | |

| Current Exam Details | |
|----------------------|-------------|
| Section | Roll Number |
| Subject | |

| Address of Correspondence | | | |
|---------------------------|-------------|-------------------|---------|
| Address | Padmal Park | | |
| State | MAHARASHTRA | District | JALGAON |
| Tehsil | ERANDOL | City/Town/Village | ERANDOL |
| Pincode | 425109 | | |





LOKSEVAK MADHUKARRAO
CHAUDHARI COLLEGE OF
SOCIAL WORK, JALGAON

Application for
Admission to CC
CHILD COUNS.
Session 2020-2021
Application No. :
2892966



Arshil

Applicant's Personal Details

| Name of the Student | Surname | First name | Father name | Mother's Name |
|---------------------|---------|------------|-------------|---------------|
| | PATIL | ATHARV | VINAY | VARSHA |

| | | | |
|---|-------------|--------------------------------------|--------------|
| Student Name(HINDI) | | | |
| Date of Birth | 24/08/2001 | Place Of Birth | JALGAON |
| Birth State | MAHARASHTRA | Birth District | JALGAON |
| Birth Tehsil | Jalgaon | Voter Id | |
| Marital Status | UNMARRIED | Blood Group | A+ |
| Religion | HINDU | Gender | MALE |
| Nationality | INDIAN | Aadhaar card Number | 225288828210 |
| Mother Tongue | MARATHI | Passport Number | |
| EID Number | | Employment Status | Unemployed |
| NCC/NSS | NO | Eligibility No. | |
| Caste Category | OBC | Sub Caste | LAVA PATIDAR |
| Enrollment Number | | PRN Number | |
| Handicap | | Is Orphan | NO |
| Saral No. | | Udise No. | |
| Student has a Desktop/ Laptop/ Smart phone | NO | Student has internet connectivity | NO |
| Municipal Ward | | | |

| | | | |
|-------------------------|-------|---------------------|--------------|
| Father's/Husband's Name | VINAY | Gross Annual Income | 1,000,000.00 |
| Occupation | | | |
| Mobile | | | |
| Office Address | | | |

| Current Exam Details | |
|----------------------|-------------|
| Section | Roll Number |
| Subject | |

| Address of Correspondence | | | |
|---------------------------|--------------------------------|-------------------|---------|
| Address | 35,shastri nagar ramanand road | | |
| State | MAHARASHTRA | District | JALGAON |
| Tehsil | JALGAON | City/Town/Village | JALGAON |
| Pincode | 425001 | | |



LOKSEVAK MADHUKARRAO
CHAUDHARI COLLEGE OF
SOCIAL WORK, JALGAON

Application for
Admission to CC
CHILD COUNS.
Session 2020-2021
Application No. :
2897802



Applicant's Personal Details

| Name of the Student | Surname | First name | Father name | Mother's Name |
|---------------------|---------|------------|-------------|---------------|
| | TAYLOR | SWATI | ANIL | USHA |

| | | | |
|---|-------------------|--------------------------------------|------------------|
| Student Name (NCC) | स्वती अश्विनी तयल | | |
| Date of Birth | 22.05.1995 | Place Of Birth | NIKTAI NAGAR |
| Birth State | MAHARASHTRA | Birth District | JALGAON |
| Birth Tehsil | NIKTAI NAGAR | Voter Id | |
| Marital Status | UNMARRIED | Blood Group | AB+ |
| Religion | HINDU | Gender | FEMALE |
| Nationality | INDIAN | Aadhaar card Number | 248076242180 |
| Mother Tongue | MAATHI | Passport Number | |
| EID Number | | Employment Status | Employed |
| NCC/NSS | NO | Eligibility No. | |
| Caste Category | SC | Sub Caste | MAHAR-37 |
| Enrollment Number | | PRN Number | 2013015400412914 |
| Handicap | NO | Is Orphan | NO |
| Serial No. | | Udise No. | |
| Student has a Desktop/ Laptop/ Smart phone | NO | Student has internet connectivity | NO |
| Municipal Ward | | | |

| | | | |
|-------------------------|--------------------|---------------------|------------|
| Father's/Husband's Name | ANIL | | |
| Occupation | Government service | Gross Annual Income | 500,000.00 |
| Mobile | | | |
| Office Address | | | |

| Current Exam Details | | | |
|----------------------|--|-------------|--|
| Section | | Roll Number | |
| Subject | | | |

| Address of Correspondence | | | |
|---------------------------|--|-------------------|---------|
| Address | 451/3 PLOT NO 19 NITYNAD NAGAR MOHADI ROAD JALGAON | | |
| State | MAHARASHTRA | District | JALGAON |
| Tehsil | JALGAON | City/Town/Village | JALGAON |
| Pincode | 425001 | | |



LOKSEVAK MADHUKARRAO
CHAUDHARI COLLEGE OF
SOCIAL WORK, JALGAON

Application for
Admission to CC
CHILD COUNS.
Session 2020-2021
Application No. :
2876867



Applicant's Personal Details

| | | | | |
|---------------------|---------|------------|-------------|---------------|
| Name of the Student | Surname | First name | Father name | Mother's Name |
| | WACH | GAVATRI | SANJAY | SARALA |

| | | | |
|---|---------------|-----------------------------------|------------------|
| Student Name(HINDI) | | Place Of Birth | JALGAON |
| Date of Birth | 30/04/1997 | Birth District | Please Select |
| Birth State | Please Select | Voter Id | |
| Birth Tehsil | Jalgaon | Blood Group | O+ |
| Marital Status | UNMARRIED | Gender | FEMALE |
| Religion | HINDU | Aadhaar card Number | 321339687819 |
| Nationality | INDIAN | Passport Number | |
| Mother Tongue | MARATHI | Employment Status | Unemployed |
| EID Number | NO | Eligibility No. | |
| NCC/NSS | NO | Sub Caste | mahadev koi |
| Caste Category | SBC | PRN Number | 2015015400123095 |
| Enrollment Number | | Is Orphan | NO |
| Handicap | | Udise No. | |
| Sural No. | | Student has internet connectivity | NO |
| Student has a Desktop/ Laptop/ Smart phone | NO | | |
| Municipal Ward | | | |

| | | | |
|-------------------------|---------------------|---------------------|------------|
| Father's/Husband's Name | SANJAY BHAGWAT WACH | Gross Annual Income | 200,000.00 |
| Occupation | | | |
| Mobile | | | |
| Office Address | | | |

| | | |
|----------------------|-------------|--|
| Current Exam Details | Roll Number | |
| Section | | |
| Subject | | |

| | | | |
|--|-------------|-------------------|---------|
| Address of Correspondence | | | |
| gat no75 nitkhedi shivar shivdham mandir | | | |
| Address | | | |
| State | MAHARASHTRA | District | JALGAON |
| Tehsil | JALGAON | City/Town/Village | JALGAON |
| Pincode | 425001 | | |

Annexure-A

List of admitted students for Career Oriented Courses under Ordinance 181

Loksevak Madhukarrao Chaudhari College of Social Work, Jalgaon

- 2) Name of Career oriented Course - Certificate Course in Child Counseling
 3) Academic Year - 2021 - 2022
 4) Intake Capacity - 60

| Sr. No. | Full name of the Students | Gender | Category | Education al Qualificati on # | Year of passing. Cert./Diploma Course (Applicable only for Diploma & Adv. Diploma Course) | Presently admitted Class (F.Y.,S.Y., T.Y./P.G. | Remark (If Any) |
|---------|---------------------------|--------|----------|-------------------------------|---|---|------------------|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| 1 | AHIRE PUJA RAVINDRA | FEMALE | SC | | | | MSWSY |
| 2 | BANKAR ROSHAN RAJU | MALE | OBC | | | | MSWFY |
| 3 | CHAVAN USHA GOVINDA | FEMALE | OPEN | | | | MSWFY |
| 4 | DODE SHARDA NATTHU | FEMALE | SBC | | | | MSWFY |
| 5 | INGALE RUCHIKA PRASHANT | FEMALE | SC | | | | MSWSY |
| 6 | JADHAV TEJASWITA MUKUND | FEMALE | OBC | | | | MSWSY |
| 7 | JAWALE MANASI PRAVIN | FEMALE | OBC | | | | MSWFY |
| 8 | MAHAJAN DIPALI RAJENDRA | MALE | OBC | | | | MSWSY |
| 9 | MALI YOGESH ANANDA | MALE | OBC | | | | MSWSY |
| 10 | PADVI CHETAN NARAYAN | MALE | ST | | | | MSWSY |
| 11 | PADVI KANTILAL GORJI | MALE | ST | | | | MSWSY |
| 12 | PATIL KALPESH SOMNATH | MALE | OBC | | | | MSWSY |
| 13 | PATIL RAHUL DANGAL | MALE | OBC | | | | MSWFY |
| 14 | PATIL SHIVANI NITIN | FEMALE | OPEN | | | | BSWSY |
| 15 | PAWAR NITIN BHANGU | MALE | VJ | | | | BSWSY |
| 16 | PAWAR UMESH HARCHAND | MALE | VJ | | | | MSWSY |
| 17 | RATHOD NITIN DEVCHAND | MALE | VJ | | | | MSWFY |
| 18 | VALVI DIWALYA INDYA | MALE | ST | | | | MSWFY |
| 19 | VALVI INDRASING RAYSING | MALE | ST | | | | MSWFY |
| 20 | VASAVE JAGAN SIPA | MALE | ST | | | | MSWFY |
| 21 | VASAVE PRAVIN VIRSING | MALE | ST | | | | MSWFY |
| 22 | WAGHE CHETAN RAVINDRA | MALE | EWS | | | | MSWFY |

CERTIFICATE

This is to certify that the documents regarding educational qualifications of the above students have been verified and found correct. The students mentioned in the list are eligible for the admission to the above mentioned course as per university ordinance-181.

(Signature)
 B. B. Ghamiyadarajput
 Co-ordinator
 Mobile No. 866999185



(Signature)
ACTING PRINCIPAL
 Loksevak Madhukarrao Chaudhari
 College of Social Work, Jalgaon

Annexure-A

List of admitted students for Career Oriented Courses under Ordinance 181

- 1) Name of the College - Dhanraj Nana Chaudhari Vidya Pratodhini's
Loksevak Madhukarrao Chaudhari College of Social Work, Jaigaon
- 2) Name of Career oriented Course - Certificate Course in Child Counseling
- 3) Academic Year - 2021 - 2022
- 4) Intake Capacity - 60

| Sr. No. | Full name of the Students | Gender | Category | Education at Qualification | Year of passing Cert./Diploma Course / Applicable only for Diploma & Adv. Diploma Course | Presently admitted Class / PG | Remark (if Any) |
|---------|---------------------------|--------|----------|----------------------------|--|-------------------------------|-----------------|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| 1 | AHIRE PUJA RAVINDRA | FEMALE | SC | | | MSWSSY | |
| 2 | JADHAV TEJASWITA MUKUND | FEMALE | OBC | | | MSWSSY | |
| 3 | JAWALE MANASI PRAVIN | FEMALE | OBC | | | MSWSSY | |
| 4 | PATIL KALPESH SOMNATH | MALE | OBC | | | MSWSSY | |
| 5 | RATHOD NITIN DEVCHAND | MALE | VJ | | | MSWSSY | |
| 6 | VALVI INDRASING RAYSING | MALE | ST | | | MSWSSY | |
| 7 | VASAVE JAGAN SIPA | MALE | ST | | | MSWSSY | |

CERTIFICATE

This is to certify that the documents regarding educational qualifications of the above students have been verified and found correct. The students mentioned in the list are eligible for the admission to the above mentioned course as per university ordinance-181.

Co-ordinator
Mobile No. -



(Signature)
ACTING PRINCIPAL

Dhanraj Nana Chaudhari
College of Social Work, Jaigaon



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - <i>Child Counseling</i> |
|----------------|-----------------|------------------|--------------------|---|
| <i>C10-196</i> | <i>12/11/21</i> | <i>1200/-</i> | <i>[Signature]</i> | Roll No. Reg. No. Year <i>2021-22</i> |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in *Child Counseling* for the Session 2021-2022

The necessary information for the admission is given below

- 1 Name in full - *AHIRE PUJA RAVINDRA*
(In Block Letters) Surname Name Middle Name
2. Mother Name *MANGLA*
3. Father Name *RAVINDRA*
4. Date of Birth *14/06/1999*
5. Caste : SC/ST/NT/SBC/OBC/OPEN *SC*
6. Medium : Marathi / English *MARATHI*
7. Present class *MSH - Ind*
8. Permanent Address *At: Ambedkar nagar, Jalgaon*
(With Phone / Cell No.) *901184974*

Signature of the Applicant

[Signature]



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - <u>Child Counseling</u> |
|----------------|-------------------|------------------|--------------|---|
| <u>110/215</u> | <u>27/12/2021</u> | <u>₹-1200/-</u> | <u>(F-2)</u> | Roll No. <u>09</u> Reg. No. Year <u>2021-22</u> |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal



To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon

Respected Sir,

I requested for the admission to Certificate Course in child Counseling

for the Session 2021-2022

The necessary information for the admission is given below

1 Name in full - BANKAR RASHAN RATU
(In Block Letters) Surname Name Middle Name

2. Mother Name Shobhabai Raju Bankar

3. Father Name Raju Devram Bankar

4. Date of Birth 19/06/2000

5. Caste : SC/ST/NT/SBC/OBC/OPEN OBC

6. Medium : Marathi / English Marathi

7. Present class MSc-I

8. Permanent Address Kharchi BK Verandal Dist. Jalgaon

(With Phone / Cell No.) 9517635590

rashanbankar77@gmail.com Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class |
|-----------------|-----------------|------------------|-------------|------------------|
| R. No. 210/2021 | 27/12/2021 | ₹ 1200/- | [Signature] | Child Counseling |

Remarks of the Selection Committee The candidate named above is fit to be admitted for admission

Admission Clerk

Coordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in Child Counseling

for the Session 2021-2022.

The necessary information for the admission is given below

- 1 Name in full - Chavan Usha Guinda
(In Block Letters) Surname Name Middle Name
2. Mother Name Karnal Guinda Chavan
3. Father Name Guinda Pradlik Chavan
4. Date of Birth 14 June 1991
5. Caste : SC/ST/NT/SBC/OBC/OPEN open
6. Medium : Marathi / English Marathi
7. Present class MSW-I
8. Permanent Address 36 Ashtavinayak Colony near Bust-stand
(With Phone / Cell No.) 9158971280 Muktanagar, Jalgaon.
Email Id - chavan.usha94@gmail.com

[Signature]
Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - <u>MSW-I</u> |
|------------|-----------------|------------------|-----------|------------------------------|
| | | | | Roll No. - <u>889</u> |
| | | | | Reg. No. |
| | | | | Year <u>2021</u> <u>2022</u> |

Child courses.

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To, -
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in child

counseling for the Session 20 - 20

The necessary information for the admission is given below

- 1 Name in full - Dade Sharada Natthu
(In Block Letters) Surname Name Middle Name
2. Mother Name Dade Pramila Natthu
3. Father Name Dade Natthu Bhika
- 4 Date of Birth 21/10/1990
5. Caste : SC/ST/NT/SBC/OBC/OPEN SBC
6. Medium : Marathi / English Marathi
7. Present class MSW-I 2021/2022
8. Permanent Address Devidas colony, Bent, Loreens school near, Jalgaon
(With Phone / Cell No.) 8999949599

Signature of the Applicant

[Signature]



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- ✓ 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class | Roll No. | Reg. No. | Year |
|------------|-----------------|------------------|-------------|------------------|-------------|----------|---------|
| C/O/213 | 27/12/2021 | RS.1200/- | [Signature] | Child Counseling | [Signature] | | 2021-22 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in child counseling

for the Session 2021-2022

The necessary information for the admission is given below

1 Name in full - INGALE RUCHIKA PRASHANT
(In Block Letters) Surname Name Middle Name

2. Mother Name Sangita Prashant Ingale.

3. Father Name Prashant Sadashiv Ingale.

4. Date of Birth 09/04/2001

5. Caste : SC/ST/NT/SBC/OBC/OPEN SC

6. Medium : Marathi / English Marathi

7. Present class MShl - I

8. Permanent Address Sharada colony, Bhusawal road, Bodwad.

(With Phone / Cell No.) 8669491187

email - ruchaog03@gmail.com

[Signature]
Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
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Application Form

the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - <u>Child Counseling</u> |
|----------------|-------------------|------------------|--------------------|---|
| <u>C10/191</u> | <u>15/11/2021</u> | <u>RS. 500/-</u> | <u>[Signature]</u> | Roll No. Reg. No. Year <u>2021-22</u> |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in Child Counseling

for the Session 2021-2022

The necessary information for the admission is given below

- 1 Name in full - JADHAV TETASWITA MUKUND
(In Block Letters) Surname Name Middle Name
2. Mother Name NAINA
3. Father Name MUKUND.
4. Date of Birth 12/08/1997
5. Caste : SC/ST/NT/SBC/OBC/OPEN O. B. C.
6. Medium : Marathi / English ENGLISH
7. Present class M.S.W, IInd Year
8. Permanent Address NANDGAON Post NANDRA(BK) Tal & Dist JALGAON.
(With Phone / Cell No.) 9765751065.

[Signature]

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - <u>child counseling</u> Roll No. Reg. No. Year <u>2021-22</u> |
|--------------|-----------------|------------------|-----------|--|
| <u>01118</u> | <u>22-11-21</u> | <u>1200</u> | | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in child counseling

for the Session 2021-2022

The necessary information for the admission is given below

1 Name in full - Jawale Mansi pravin
(In Block Letters) Surname Name Middle Name

2. Mother Name Dipali pravin Jawale

3. Father Name Pravin Bhaskar Jawale

4. Date of Birth 18/3/2000

5. Caste : SC/ST/NT/SBC/OBC/OPEN OBC

6. Medium : Marathi / English Marathi

7. Present class MGW - II

8. Permanent Address At post De kuthara Tal - Yawal

(With Phone / Cell No.) 9284826218 / 9545580140

Mansi
Signature of the Applicant



Application Form

the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - <i>child counselling</i> |
|---------------|-------------------|------------------|-----------|---|
| <i>Online</i> | <i>03-01-2022</i> | <i>1200</i> | | Roll No. Reg. No. Year <i>2021-22</i> |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in child

for the Session 2021-2022

The necessary information for the admission is given below

- 1 Name in full - Mahajan dipali Rajendra
(In Block Letters) Surname Name Middle Name
2. Mother Name Sangita Rajendra Mahajan
3. Father Name Rajendra Shammarav Mahajan
4. Date of Birth 24/10/1997
5. Caste : SC/ST/NT/SBC/OBC/OPEN OBC
6. Medium : Marathi / English Marathi
7. Present class MSW-I
8. Permanent Address Kharkhi Bk. Tel. Ercandol.
(With Phone / Cell No.) 8605774314

Email ID - dipali1997mahajan@gmail.com

Signature of the Applicant
Mahajan
cm



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class <u>Child counselling</u> |
|------------|-----------------|------------------|-----------|--------------------------------------|
| 224 | 01/01/2022 | 1200/- | | Roll No. Reg. No. Year 2021-22 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in Certificate
course in child counselling for the Session 2021-2022

The necessary information for the admission is given below

- 1 Name in full - Mali Yogesh Ananda
(In Block Letters) Surname Name Middle Name
2. Mother Name Reshmabai
3. Father Name Ananda Shenpadu mali
4. Date of Birth 24-04-2000
5. Caste : SC/ST/NT/SBC/OBC/OPEN OBC
6. Medium : Marathi / English Marathi
7. Present class MSW-I
8. Permanent Address At. Post Kharchi BK. Tal. erandol dist. Jalgaon
(With Phone / Cell No.) 8459886503

Yogesh
Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- ✓ 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - MSW-I Roll No. 123 Reg. No. Year - 2021-22 |
|------------------------|-----------------|------------------|-----------|---|
| G10/DC/A/21-22/ 221 | 29-12-21 | 1200 | | Child Counseling |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principa

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in certificate course

in child counseling

For the Session 2021-2022

The necessary information for the admission is given below

1 Name in full - padvi chetan Narayan
(In Block Letters) Surname Name Middle Name

2. Mother Name padvi Yashodabai Narayan

3. Father Name padvi narayan velji

4. Date of Birth 15-01-1999

5. Caste : SC/SJ/NT/SBC/OBC/OPEN ST

6. Medium : Marathi / English Marathi

7. Present class MSW-IInd

8. Permanent Address vt. Dalepur Tal. post Taloda Dist. Nandurbar

(With Phone / Cell No.) 726409 5630 chetanpadvi@gmail.com

chetan
Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - MSW II nd |
|------------------------|-----------------|------------------|-----------|--|
| G10/DC/A/24-23/ 219 | 29-12-21 | 1200/- | | Roll No. 50 Reg No. Year 2021 - 2022 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in certificate course in
child counseling for the Session 2021-2022

The necessary information for the admission is given below

1 Name in full - padvi Kantilal Gosji
(In Block Letters) Surname Name Middle Name

2. Mother Name Dwabai Gosji padvi

3. Father Name Gosji Jalma padvi

4. Date of Birth 12-1-1998

5. Caste : SC/ST/NT/SBC/OBC/OPEN ST

6. Medium : Marathi / English Marathi

7. Present class MSW - II

8. Permanent Address at Khai po. Dub. tal. Akkikumbh dist Nandurbar

(With Phone / Cell No.) 839076918 - 8259104301

[Signature]
Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Roll No. Reg. No. Year |
|-------------------|-----------------|------------------|-----------|---|
| online Payment | 15-11-21 | 500 | | 2021-22 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in child

counseling for the Session 2021-2022

The necessary information for the admission is given below

1 Name in full - Patil Kalpesh Somnath
(In Block Letters) Surname Name Middle Name

2. Mother Name Surekha

3. Father Name Patil Somnath Puttatrav

4. Date of Birth 10-09-1993

5. Caste : SC/ST/NT/SBC/OBC/OPEN OBC

6. Medium : Marathi / English Marathi

7. Present class MSW - IInd sem

8. Permanent Address Pt-10, Yageshwar Nayar, Old Khedi Road, Jalgaon

(With Phone / Cell No.) 9011911779

K. S. Patil
Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- ✓ 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - MSW ^{Child counseling} |
|----------------------|-----------------|------------------|-----------|---|
| 210/DC/A/2022 220 | 29/12/2021 | 1200/- | | Roll No. 156 Reg. No. Year 2021-2022 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in certificate course
in child counseling for the Session 2021-2022

The necessary information for the admission is given below

1 Name in full - Patil Rahul Dangal
(In Block Letters) Surname Name Middle Name

2. Mother Name Bekha Dangal patil

3. Father Name Dangal Azjun patil

4. Date of Birth 28-11-1999

5. Caste : SC/ST/NT/SBC/QBC/OPEN OBC

6. Medium : Marathi / English Marathi

7. Present class MSW IInd year.

8. Permanent Address AT. post waghadi Tal. Shirpur Dist. Dhule.

(With Phone / Cell No.) 7709386139 - patilrd289@gmail.com

Patil
Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - <u>B.A.</u> |
|---------------|-----------------|------------------|-----------|---------------------|
| <u>online</u> | <u>31-12-21</u> | <u>1200</u> | | Roll No. <u>57</u> |
| | | | | Reg. No. |
| | | | | Year <u>2021/22</u> |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in child

Counseling for the Session 2021-2022.

The necessary information for the admission is given below

1 Name in full - Patil Shivani Nitin
(In Block Letters) Surname Name Middle Name

2. Mother Name Patil Umile Nitin

3. Father Name Patil Nitin Waman

4. Date of Birth 05/05/2000

5. Caste : SC/ST/NT/SBC/OBC/OPEN OPEN

6. Medium : Marathi / English Marathi

7. Present class MISW-I 2021/22

8. Permanent Address Plot No 21 Sarvatham nagar, Sindhi colony road Jalgaon

(With Phone / Cell No.) 8459806030

[Signature]
Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - <u>Child Counseling</u> |
|----------------|-------------------|------------------|--------------------|--|
| <u>110/210</u> | <u>30/11/2021</u> | <u>₹ 600/-</u> | <u>[Signature]</u> | Roll No. <u>[Blank]</u> Reg. No. Year <u>2021-2022</u> |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in child counseling.

----- for the Session 2021-2022

The necessary information for the admission is given below

1 Name in full - Pawar Nitin Bhangu
(In Block Letters) Surname Name Middle Name

2. Mother Name Pawar Netaibai Bhangu

3. Father Name Pawar Bhangu Ananda

4. Date of Birth 04-05-2001

5. Caste : SC/ST/NT/SBC/OBC/OPEN VJ-NT

6. Medium : Marathi / English Marathi

7. Present class BSW-II

8. Permanent Address At. Post. Khedgaon tal. Erandol Dist Jalgaon
425109

(With Phone / Cell No.) 7666188925

[Signature]
Signature of the Applicant



Application Form

the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - BSW II Roll No. 206 Reg. No. Year 2021-22 |
|------------|-----------------|------------------|-----------|--|
| C10/211 | 30/11/2021 | Rs. 600/- | (R) | Child Counseling |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in Counseling

for the Session 2021-2022

The necessary information for the admission is given below

1. Name in full - Pawar Umesh Haichand
(In Block Letters) Surname Name Middle Name
2. Mother Name Pawar Savitribai Haichand
3. Father Name Pawar Haichand Gulab
4. Date of Birth 19/07/2002
5. Caste : SC/ST/NT/SBC/OBC/OPEN VJNT
6. Medium : Marathi / English Marathi
7. Present class BSW II
8. Permanent Address mankvedigee Po. Kuchera) tal. Bhusawal
(With Phone / Cell No.) 9021668962 Dist. Jalgaon

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Child Counseling |
|------------|-----------------|------------------|-----------|--------------------------------------|
| online | 18-11-21 | 500 | | Roll No. Reg. No. Year 2021-22 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in CHILD COUNSELING

_____ for the Session 201 -201

The necessary information for the admission is given below

- 1 Name in full - RATHOD NITIN DEVCHAND
(In Block Letters) Surname Name Middle Name
2. Mother Name SUMAN
3. Father Name DEVCHAND
4. Date of Birth 20/11/1998
5. Caste : SC/ST/NT/SBC/OBC/OPEN VJNT
6. Medium : Marathi / English MARATHI
7. Present class MSW- IInd.
8. Permanent Address At. Po. MALKHEDA TEL- JAMNER DIST- JALGAON
(With Phone / Cell No.) 9518992168

N.Rathod.
Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - MSW-I Roll No. 59 Reg. No. Year 2021-22 |
|------------|-----------------|------------------|-----------|--|
| online | 28-12-21 | 1200 | | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in child counseling

for the Session 201 -201

The necessary information for the admission is given below

- 1 Name in full - Valvi Divyalya Indya
(In Block Letters) Surname Name Middle Name
2. Mother Name Giribai
3. Father Name Dr. Indya detka valvi
4. Date of Birth 07/04/1999
5. Caste : SC/ST/NT/SBC/OBC/OPEN ST
6. Medium : Marathi / English marathi
7. Present class MSW-I
8. Permanent Address At Umilamal Post, Jamana Tal. Akkalkuwa
(With Phone / Cell No.) 9891668607 dist Nandurbar

D. Valvi
Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

1) Certificate Course in Human Resource management

2) Certificate Course in N.G.O. Management

3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - <u>child-counseling</u> |
|---------------|-------------------|------------------|-----------|---|
| <u>online</u> | <u>24-11-2021</u> | <u>1200</u> | | Roll No. Reg. No. Year <u>2021-22</u> |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon

Respected Sir,

I requested for the admission to Certificate Course in child counseling

for the Session 2021-2022

The necessary information for the admission is given below

1 Name in full - NALVI INDRASING RASING
(In Block Letters) Surname Name Middle Name

2. Mother Name MEKABAI

3. Father Name

4. Date of Birth

5. Caste : SC/ ST/ NT/ SBC/ OBC/ OPEN

6. Medium : Marathi / English

7. Present class MSW-FY

8. Permanent Address AT- Sallibar PO-Tamana Tal Akhaluwa

(With Phone / Cell No.) 7083608638/9022941917

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

1) Certificate Course in Human Resource management

2) Certificate Course in N.G.O. Management

3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class <i>Child counseling</i> |
|---------------|-------------------|------------------|-----------|---|
| <i>online</i> | <i>24-11-2021</i> | <i>1200</i> | | Roll No. Reg. No. Year <i>2021-22</i> |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon

Respected Sir,

I requested for the admission to Certificate Course in *child counseling*

for the Session *2021-2022*

The necessary information for the admission is given below

1 Name in full - *VASAVE TAGAN SIPA*
(In Block Letters) Surname Name Middle Name

2. Mother Name *Ramabai*

3. Father Name *Sipa*

4. Date of Birth _____

5. Caste : SC/ ST/ NT/ SBC/ OBC/ OPEN _____

6. Medium : Marathi / English _____

7. Present class *MSW-5Y*

8. Permanent Address *At - Veli pa - Jamana Tal - Akkalkeri*

(With Phone / Cell No.) *9404030929 / 7558336775*

Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- ✓ 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - MSW - T |
|------------|-----------------|------------------|-----------|-----------------|
| online | 25-12-21 | 1200 | | Roll No. 63 |
| | | | | Reg. No. |
| | | | | Year 2021-2022 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in child counselling
for the Session 2021-2022

The necessary information for the admission is given below

- 1 Name in full - Vasant Pravin Virsing
(In Block Letters) Surname Name Middle Name
2. Mother Name Badhabai
3. Father Name Virsing Krishna Vasant
4. Date of Birth 10-12-1999
5. Caste : SC/ST/NT/SBC/OBC/OPEN ST
6. Medium : Marathi / English Marathi
7. Present class MSW-T
8. Permanent Address At Po - Nalgavhan Taloda Dist - Nandurbar
(With Phone / Cell No.) 8141972480

Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Child course |
|------------|-----------------|------------------|-----------|--------------------------------------|
| 223 | 01/01/2022 | 1200/- | | Roll No. Reg. No. Year 2021-22 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in certificate course
in child counseling for the Session 2021-2022

The necessary information for the admission is given below

- 1 Name in full - Waghe Chetan Ravindra
(In Block Letters) Surname Name Middle Name
2. Mother Name Arunbai
3. Father Name Ravindra Hazi Waghe
4. Date of Birth 15-04-1998
5. Caste : SC/ST/NT/SBC/OBC/OPEN EWS
6. Medium : Marathi / English marathi
7. Present class MSW-I
8. Permanent Address At: Post: Kharchi BK Tal: Erandol dist Jalgaon
(With Phone / Cell No.) 7719057292

Signature of the Applicant

Annexure-A

List of admitted students for Career Oriented Courses under Ordinance 181

Loksevak Madhukarrao Chaudhari College of



- 2) Name of Career oriented Course - Certificate Course in Child Counseling
 3) Academic Year - 2022 - 2023
 4) Intake Capacity - 60

| Sr. No. | Full name of the Students | Gender | Category * | Education al Qulificati on # | Year of passing. Cert./Diploma Course (- Applicable only for Diploma & Adv. Diploma Course) | Presently admitted Class (F.Y.,S.Y., T.Y./P.G. | Remark (If Any) |
|---------|--------------------------------|--------|------------|------------------------------|---|---|------------------|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| 1 | AAHIRE POOJA DEEPAK | FEMALE | SC | XII | | BSWTY | |
| 2 | AKOLKAR ABHISHEK APPASAHEB | MALE | OPEN | XII | | BSWSY | |
| 3 | BARI MOHINI PANDURANG | FEMALE | OBC | XII | | BSWSY | |
| 4 | BARI VASUDEO BHAGAWAN | MALE | OBC | XII | | MSWfy | |
| 5 | BAVISKAR LATA SHAMRAO | FEMALE | SC | XII | | MSWfy | |
| 6 | BHANDANE MAYUR ARUN | MALE | OBC | XII | | MSWfy | |
| 7 | BHARUDE MANISHA GHANSHAM | FEMALE | SC | XII | | MSWSY | |
| 8 | BODADE YOGESH RAJU | MALE | OBC | XII | | MSWfy | |
| 9 | CHAUDHARI KAJAL DNYANESHWAR | FEMALE | OBC | XII | | BSWSY | |
| 10 | CHAUDHARI KIRAN KRUSHNA | MALE | ST | XII | | BSWfy | |
| 11 | CHAUDHARI REVATI VITHOBA | FEMALE | OPEN | XII | | BSWSY | |
| 12 | CHAVAN TEJAS AANANDA | MALE | ST | XII | | BSWSY | |
| 13 | CHAVHAN AJAY GOVINDRAO | MALE | OPEN | XII | | MSWSY | |
| 14 | DESHMUKH SIDDHESHWAR SURYAKANT | MALE | OPEN | XII | | MSWSY | |
| 15 | DHANGAR YOGITA RAMDHAN | FEMALE | NT-C | XII | | MSWfy | |
| 16 | DHUM CHANDRAKANT KISAN | MALE | ST | XII | | BSWfy | |
| 17 | GADHE DIKSHA CHINTAMAN | FEMALE | SC | XII | | BSWfy | |
| 18 | GARGE SWAPNALI RAMANLAL | FEMALE | OPEN | XII | | MASY | |
| 19 | HADE ANIL DNYANESHWAR | MALE | OPEN | XII | | MSWfy | |
| 20 | JADHAV YOGITA NARAYAN | FEMALE | OBC | XII | | MSWfy | |
| 21 | KATE PRATIK JITENDRA | MALE | NT-C | XII | | MSWSY | |
| 22 | KOKATE AJAY GOPAL | MALE | OBC | XII | | | |
| 23 | LULE BHUSHAN DEVENDRA | MALE | OBC | XII | | BSWSY | |
| 24 | MAHAJAN KHUSHBOO VINOD | FEMALE | OBC | XII | | MSWfy | |
| 25 | MAHAJAN SHIVANI MADHUKAR | FEMALE | OBC | XII | | MSWSY | |

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
|----|------------------------------|--------|----------|------------------------------|---|---|------------------|
| | | Gender | Category | Education al Qulificati on # | Year of passing- Cert./Diploma Course (Applicable only for Diploma & Adv. Diploma Course) | Presently admitted Class (F.Y./S.Y., T.Y./P.G. | Remark (If Any) |
| 26 | MAHAJAN SHUBHAM SAMADHAN | MALE | OBC | XII | | | |
| 27 | MORE HARSHAL PRAKASH | MALE | SC | XII | | | MSW FY |
| 28 | MORE SAKSHI NATTHU | FEMALE | NT | XII | | | BSWSY |
| 29 | NEHETE VAISHALI SHARAD | FEMALE | OBC | XII | | | BSWSY |
| 30 | NILE MANISHA RAGHUNATH | FEMALE | NT-C | XII | | | MSW FY |
| 31 | PAGI KISHOR RAJKUMAR | MALE | ST | XII | | | MSWSY |
| 32 | PANPATIL ROHAN MANOHAR | MALE | SC | XII | | | BSW FY |
| 33 | PATIL DARSHAN RAVINDRA | MALE | OBC | XII | | | MSW FY |
| 34 | PATIL JAYASHRI VISHVANATH | FEMALE | OBC | XII | | | BSW FY |
| 35 | PATIL JITENDRA YUVRAJ | MALE | NT-B | XII | | | MSW FY |
| 36 | PATIL LALIT VINOD | MALE | VJ | XII | | | BSW FY |
| 37 | PAWAR ANIL NAVALSING | MALE | NT | XII | | | BSWSY |
| 38 | PAWAR NILESH LALA | MALE | NT | XII | | | BSW TY |
| 39 | RAVERKAR HRISHIKESH VISHVESH | MALE | OPEN | XII | | | LLB-III |
| 40 | TADAVI AARIF MEHERBAN | MALE | ST | XII | | | MSW FY |
| 41 | TADVI MUSKAN IBRAHIM | FEMALE | ST | XII | | | MSWSY |
| 42 | THOSAR LAXMI ASHOK | FEMALE | SC | XII | | | MSWSY |
| 43 | WANKHEDE NIKITA RAJENDRA | FEMALE | SC | XII | | | BSWSY |
| 44 | WANKHEDE SANJANA KESHOR | FEMALE | OBC | XII | | | MSWSY |

CERIFICATE

This is to certify that the documents regarding educational qualifications of the above students have been verified and found correct. The students mentioned in the list are eligible for the admission to the above mentioned course as per university ordinance-181.

Co-ordinator
Mobile No. -



(Signature)
Dr. RAKESH P. CHAUDHARI
PRINCIPAL
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - BSW II Roll No. 01 Reg. No. Year 2022 |
|----------------|-----------------|------------------|-----------|--|
| 10/DC/A 250 | 10/11/2022 | Rs 600/- | | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,

Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



POOJA AHIRE

Respected Sir,

I requested for the admission to Certificate Course in child counseling

for the Session 2022-2023

The necessary information for the admission is given below

1. Name in full - Aahire Pooja Deepak
(In Block Letters) Surname Name Middle Name

2. Mother Name Vandana Ahire

3. Father Name Deepak Ahire

4. Date of Birth 04/04/2004

5. Caste : SC/ST/NT/SBC/OBC/OPEN SC

6. Medium : Marathi / English Marathi

7. Present class BSW-II

8. Permanent Address Forest Colony Harda [MP]

(With Phone / Cell No.) 7725051054

Signature of the Applicant



लोकसेवाक मनुकरराव चौधरी कॉलेज ऑफ सोशल वर्क

जळगाव

कॉलेज कोड:
LMCCSW

अर्थ क्रमांक: 2



फक्त कॉलेजच्या
वाफरासाठी

अभ्यासक्रम वासाठी लागू, CC चॅटल फॉर्म.

माध्यम: मराठी

नोंदणी तारीख: 17/10/2022

नोंदणी क्रमांक
2208542

1. वैयक्तिक माहिती विभाग

| | आडनाव | पहिले नाव | मधले नाव |
|----------------------------------|------------------------------|---------------------------|------------|
| विद्यार्थ्याचे नाव | अकोलेकर | अभियेक | आप्यासाहेब |
| वडिलांचे नाव | | | |
| आईचे नाव: राणी | परातील विद्यार्थी: नाही | | |
| वैवाहिक स्थिती: अविवाहित | सरल क्रमांक: | | |
| जन्मतारीख: 08/10/2002 | लिंग: पुरुष | | |
| जन्म ठिकाण: हसनाबाद | रक्त गट: O+ | | |
| आजीवांचे नाव: | मूळ ठिकाणी: | | |
| मतदार ओळखपत्र क्रमांक: | अवयव दाता: नाही | | |
| वैकेचे नाव: | खारे क्रमांक.: | व्यवहाराचा प्रकार: ऑनलाइन | |
| धर्म: हिंदू | राष्ट्रीयत्व: भारतीय | UDISE क्र. | |
| आधार कार्ड क्रमांक: 470104264596 | ड्रायव्हिंग लायसन्स क्रमांक: | पात्रता क्रमांक: | |

2. पत्ता तपशील

| | | | |
|-----------------------|---|-----------------|----------------------|
| पत्रव्यवहाराचा पत्ता: | येथे, पोस्ट हसनाबाद, ता. भोकरदन, जिल्हा-जालना | | पिन कोड: 424101 |
| राज्य: महाराष्ट्र | जिल्हा: जळगाव | तहसील: चाळीसगाव | शहर: चाळीसगाव |
| कायमचा पत्ता: | येथे, पोस्ट हसनाबाद, ता. भोकरदन, जिल्हा-जालना | | पिन कोड: 431114 |
| राज्य: महाराष्ट्र | जिल्हा: जालना | तहसील: हसनाबाद | शहर: हसनाबाद, भोकरदन |

3. संपर्काची माहिती

| | |
|---|-------------------------|
| विद्यार्थ्याचा मोबाईल क्रमांक: 9890388656 | पर्यायी संपर्क क्रमांक: |
| विद्यार्थी ईमेल आयडी: A450RS@GMAIL.COM | पालक फोन: |

4. कायदेशीर आरक्षण माहिती विभाग

| | | |
|-------------------------|----------------------------|-------------------|
| अधिवसन राज्य: | प्रवेश श्रेणी: ओपन | जात प्रवर्ग: उपडा |
| जात: | Phy. दिव्यांग: | |
| जात प्रमाणपत्र क्रमांक: | शिकण्याची अक्षमता क्रमांक: | |

5. सामाजिक आरक्षण (विशेष श्रेणी) माहिती विभाग

| SR क्र. | सामाजिक आरक्षण नाव |
|---------|--------------------|
| | |



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - BSW II |
|------------|-----------------|------------------|-----------|----------------|
| C10/DC/258 | 11/11/22 | 600/- | | Roll No. 04 |
| | | | | Reg. No. |
| | | | | Year 2022 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,

Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in child counseling

for the Session 2022-2023

The necessary information for the admission is given below

- 1 Name in full - Bani Mohini Pandurang
(In Block Letters) Surname Name Middle Name
2. Mother Name Sunanda
3. Father Name Pandurang
4. Date of Birth 07/06/2003
5. Caste : SC/ST/NT/SBC/OBC/OPEN OBC
6. Medium : Marathi / English Marathi
7. Present class BSW-II
8. Permanent Address shedunc sheduni
(With Phone / Cell No.) 8329133028


Signature of the Applicant

ADMISSION FORM

For the Admission Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in S.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Roll No. Reg. No. Year |
|------------|-----------------|------------------|--|---|
| 05/00/99 | 14/11/2022 | RS 600/- |  | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



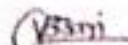
Respected Sir,

I requested for the admission to **Certificate Course in** child counselling

for the Session 2022-2023

The necessary information for the admission is given below

1. Name in full - BARI VASUDEO BHARWAN
(In Block Letters) Surname Name Middle Name
 2. Mother Name SUNITA
 3. Father Name BARI BHARWAN NAMDEO
 4. Date of Birth 25 NOV 1996
 5. Caste : SC/ST/NT/SBC/OBC/OPEN OBC
 6. Medium : Marathi / English MARATHI
 7. Present class AP, SHERSOLI (PN) TAL-DIS - TALGAON MSW-FY
 8. Permanent Address SAME
- (With Phone / Cell No.) 97 69 1222 50


Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- ✓ 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - <u>Child Counseling</u> |
|------------|-----------------|------------------|-----------|--|
| 279 | 18-11-22 | 1200/- | | Roll No. - 6 Reg. No. Year 2022-23 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,

~~The~~ Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in child-

Counseling for the Session 2022-2023

The necessary information for the admission is given below

1 Name in full - Baviskar Lata Shamrao
(In Block Letters) Surname Name Middle Name

2. Mother Name Kalabai

3. Father Name Shamrao

4. Date of Birth 26/06/1986

5. Caste : SC/ST/NT/SBC/OBC/OPEN SC



6. Medium : Marathi / English Marathi

7. Present class MS/4-F1

8. Permanent Address At Post Varad Bk. Tal Dharangon.

(With Phone / Cell No.) 8806983568, 7588663568

Signature of the Applicant


| | | | | |
|---|---|----------------------------------|------------------------------------|---|
|  | LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK Jalgaon | | College Code: LMCCSW |  |
| | | | Application No.: 10 | |
| For College use only | Course Applied For: CC CHILD COUNS. Medium: MARATHI Registration Date: 19/10/2022 | | Registration No. 2213254 | |
| 1. Personal information section | | | | |
| | Last Name | First Name | Middle Name | |
| Name of Student | BHANDANE | MAYUR | ARUN | |
| Father's Name | | | | |
| Mother's Name: SUNITA | | In-House Student: NO | | |
| Marital Status: UNMARRIED | | Saral No.: | | |
| Date of Birth: 26/07/1998 | | Gender: MALE | | |
| Place of Birth: MOHADI | | Blood Group: A+ | | |
| Grandfather's Name: | | Native Place: | | |
| Voter ID card No.: | | Organ Donor: NO | | |
| Bank Name: | Account No.: | Transaction Type: ONLINE | | |
| Religion: HINDU | Nationality: INDIAN | UDISE No.: | | |
| Aadhaar card No.: 235487317203 | Driving Licence No.: | Eligibility No.: | | |
| 2. Address Details | | | | |
| Address of Correspondence: | AT POST MOHADI TAL JAMNER DIST JALGAON | | Pin Code: 425114 | |
| State: MAHARASHTRA | District: JALGAON | Tehsil: JAMNER | City: JAMNER | |
| Permanent Address: | AT POST MOHADI TAL JAMNER DIST JALGAON | | Pin Code: 425114 | |
| State: MAHARASHTRA | District: JALGAON | Tehsil: JAMNER | City: JAMNER | |
| 3. Contact Details | | | | |
| Student Mobile No.: 8806573739 | | Alternate Contact Number: | | |
| Student Email Id: MAYURBHADANE621@GMAIL.COM | | Parent phone: 7066304233 | | |
| 4. Legal Reservation Information Section | | | | |
| Domicile state: | Admission Category: OBC | Caste Category: OBC | | |
| Caste: KUNBI | Phy. Handicapped: | | | |
| Caste Certificate No.: | Learning Disability No.: | | | |
| 5. Social Reservation (Special Category) Information Section | | | | |
| SR No. | SOCIAL RESERVATION NAME | | | |

MSH-F7

Application Form

For the Admission of Certificate Course in
1) Certificate Course in Human Resource management
2) Certificate Course in N.G.O. Management
3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Child counselling | |
|------------|-----------------|------------------|--|---------------------------|------------------|
| | | | | Roll No. | Reg. No. Year |
| 284 | 01.11.22 | 1200/- |  | | 2022-23 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk _____ Co-ordinate _____ Principal _____

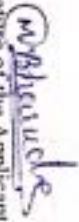
To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,
I requested for the admission to Certificate Course in Child Health Counseling
_____ for the Session 2022-2023

The necessary information for the admission is given below

- 1. Name in full - BHRAUDE Surname MANISHA Middle Name GHANASHAM
(In Block Letters)
- 2. Mother Name MAKADABAI
- 3. Father Name GHANASHAM
- 4. Date of Birth 29.10.1985
- 5. Caste : SC/ST/NT/SBC/OBC/OPEN SC
- 6. Medium : Marathi/English
- 7. Present class MSW-II year
- 8. Permanent Address At post - Amoda Tal - Vadod
(With Phone / Call No.) 9325700070, 7588648547


Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class | Roll No. | Reg. No. | Year |
|------------|-----------------|------------------|-----------|-------|----------|----------|---------|
| 210/20/222 | 14/11/2022 | ₹600/- | | Child | | | 2022-23 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in Child Counseling

for the Session 2022-2023

The necessary information for the admission is given below

1. Name in full - BODADE Surname YOGESH Name RAJU
(In Block Letters)
2. Mother Name GOKULABAI Middle Name
3. Father Name RAJU KISON Bodade
4. Date of Birth 20 APR 2000
5. Caste : SC/ST/NT/SBC/OBC/OPEN SC
6. Medium : Marathi / English MARATHI
7. Present class AP Bokheda tal. Mukhainagar dist - Jalgaon
8. Permanent Address Some Bokheda taluwa Post Chaudhina
- (With Phone / Cell No.) 7620059480

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Roll No. Reg. No. Year |
|------------|-----------------|------------------|-----------|---|
| 258 | 11/11/2022 | 600/- | | |

Remarks of the Selection Committee: The candidate named above is/is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,

Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon

Respected Sir,

I requested for the admission to Certificate Course in child counselling



_____ for the Session 2022-2023

The necessary information for the admission is given below

- 1 Name in full - Chavhan Kajal Bhayneshwar
(In Block Letters) Surname Name Middle Name
2. Mother Name Lata Bai
3. Father Name Bhayaneshwar
4. Date of Birth 06/02/2003
5. Caste : SC/ST/NT/SBC/OBC/OPEN OBC
6. Medium : Marathi / English Marathi
7. Present class BSW - 1stnd
8. Permanent Address Asoda, Chitto Bholenagar
(With Phone / Cell No.) 9145470452

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
 LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
 Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.C.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Roll No. Reg. No. Year |
|------------|-----------------|------------------|-----------|---|
| Online | 11-11-22 | 1200 | | OC 2022.23 |

Remarks of the Selection Committee: The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,

~~Principal~~
 Loksevak Madhukarrao Chaudhari
 College of Social Work, Jalgaon



Respected Sir:

I requested for the admission to **Certificate Course in** child counselling

..... for the Session 2022-2023

The necessary information for the admission is given below

1. Name in full - CHANDHAR Surname KARNI Name KRUSHNA Middle Name

2. Mother Name MINABAI

3. Father Name KRUSHNA

4. Date of Birth 29/16/2003

5. Caste : SC/ST/NTSBC/OBC/OPEN ST

6. Medium : Marathi / English Marathi

7. Present class P.50 - 1st year

8. Permanent Address Ad. Al. post - Vhasgaon Tal. - path. dist. - Vadod
 (With Phone / Cell No.) 7665899278

Chandhar
 Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
2) Certificate Course in N.G.O. Management
3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Roll No. Reg. No. Year |
|-----------------|-----------------|------------------|-----------|---|
| C10/2024 252 | Rs. 10/11/22 | Rs. 600/- | | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,

The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to **Certificate Course in** child Counseling

..... for the Session 2022- 20 23

The necessary information for the admission is given below

- 1 Name in full - Chaudhari Revati Vithoba
(In Block Letters) Surname Name Middle Name
2. Mother Name Pooja
3. Father Name Vithoba
4. Date of Birth 31/05/2004
5. Caste : SC/ST/NT/SBC/OBC/OPEN Open
6. Medium : Marathi / English Marathi
7. Present class BSW-II
8. Permanent Address Kandori, Bhusawal
(With Phone / Cell No.) 99596296 9922996296

Signature of the Applicant



LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL
WORK
Jalgaon

College Code:
LMCCSW

Application No.:
3



For College use
only

Course Applied For: CC CHILD COURSE
Medium: MARATHI

Registration No.
2211495

Registration Date: 18/10/2022

| 15. Personal information section | | | |
|---|---------------------------|--------------------------|--------------|
| | Last Name | First Name | Middle Name |
| Name of Student | CHAVAN | TEJAS | AANANDA |
| Father's Name | | | |
| Mother's Name: BEB | | In-House Student: NO | |
| Marital Status: UNMARRIED | | SaraI No.: | |
| Date of Birth: 03/12/2002 | | Gender: MALE | |
| Place of Birth: DEVALI | | Blood Group: O+ | |
| Transferter's Name: | | Native Place: | |
| Voter ID card No.: | | Organ Donor: NO | |
| Bank Name: | Account No.: | Transaction Type: ONLINE | |
| Religion: HINDU | Nationality: INDIAN | UIDISE No. | |
| Aadhaar card No.: 540112594621 | Driving Licence No.: | Eligibility No.: | |
| 16. Address Details | | | |
| Address of Correspondence: | AT POST BORDAIVAT | Pin Code: 423502 | |
| State: MAHARASHTRA | District: NASHIK | Tehsil: KALWAN | City: KALWAN |
| Permanent Address: | AT POST BORDAIVAT | Pin Code: 423502 | |
| State: MAHARASHTRA | District: NASHIK | Tehsil: KALWAN | City: KALWAN |
| 17. Contact Details | | | |
| Student Mobile No.: 7499547317 | Alternate Contact Number: | | |
| Student Email Id: TEJASCHAVAN8630@GMAIL.COM | Parent phone: | | |
| 18. Legal Reservation Information Section | | | |
| Domicile state: | Admission Category: ST | Caste Category: ST | |
| Caste: KOWARI | Phy. Handicapped: | | |
| Caste Certificate No.: | Learning Disability No.: | | |
| 19. Social Reservation (Special Category) Information Section | | | |
| SRI No. | SOCIAL RESERVATION NAME | | |



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Child Counseling Roll No. Reg. No. Year |
|------------|-----------------|------------------|-----------|--|
| 291 | 14/11/22 | 600/- | | 2022-23 |

Remarks of the Selection Committee The candidate named above is/is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in Child Counseling
..... for the Session ~~2022-2023~~ 23

The necessary information for the admission is given below

1. Name in full - CHAYHAN Surname ATAY Name GOVINDRAO Middle Name
2. Mother Name Kandhai Govindrao Chavhan
3. Father Name Govindrao Pundlik Chavhan
4. Date of Birth 09/02/1989
5. Caste : SC/ST/NT/SBC/OBC/OPEN open
6. Medium : Marathi / English Marathi
7. Present class MSW - IInd year
8. Permanent Address 35 Ashavringak Colony, New Post office mukhtangse
(With Phone / Cell No.) 9857041263 D. Jalgaon.

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the MAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - <u>Child Care</u> |
|------------|-----------------|------------------|-----------|---|
| 106 | 12/11/22 | 600/- | | Roll No. 13 Reg. No. Year 2022-25 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Princip



To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon

Respected Sir,

I requested for the admission to Certificate Course in child counseling
..... for the Session 2022-2023

The necessary information for the admission is given below

1. Name in full - Deshrajesh Diksheshwar - Sargalkant
(In Block Letters) Surname Name Middle Name
2. Mother Name Pulemini
3. Father Name Sargalkant
4. Date of Birth 30/09/1995
5. Caste : SC/ST/NT/SBC/OBC/OPEN OPEN
6. Medium : Marathi / English Marathi
7. Present class M3rd year
8. Permanent Address Adpest morochi, Tal- Malakhiraj, Dis-Solapur
(With Phone / Cell No.) 9146888483

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the AAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class-Child Counseling |
|------------|-----------------|------------------|-----------|--------------------------------------|
| 981 | 18/11/22 | 600/- | | Roll No. Reg. No. Year 2022-23 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Print

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in Child Counseling

..... for the Session 2022-2023

The necessary information for the admission is given below

- 1 Name in full (In Block Letters) Shreemagar Surname Yogita Name Parmelham Middle Name
2. Mother Name Parmelham
3. Father Name Parmelham
4. Date of Birth 07/05/2001
5. Caste : SC/ST/NT/SBC/OBC/OPEN NT
6. Medium : Marathi / English Marathi
7. Present class MSW-T
8. Permanent Address AT. Post. Vadamsare Tal. Paithora
(With Phone / Cell No.) 9507234419 Jal - Jalgaon

Signature of the Applicant



DHÁNAJÍ NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Child Counseling |
|------------|-----------------|------------------|-----------|--------------------------------------|
| 267 | 14/11/22 | 600/- | | Roll No. Reg. No. Year 2022-23 |

Remarks of the Selection Committee The candidate named above is/is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
~~Principal~~
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in child counseling
..... for the Session 2022-2023

The necessary information for the admission is given below

1. Name in full - dhruv chandrakant kishn
(In Block Letters) Surname Name Middle Name
2. Mother Name Nandabai kishn dhruv
3. Father Name kishn dharama dhruv
4. Date of Birth 07/02/2002
5. Caste : SC/ST/NT/SBC/OBC/OPEN ST
6. Medium : Marathi / English Marathi
7. Present class BGM-1st
8. Permanent Address At. Vadmal post : man : hat : sagana (Mashik)
(With Phone / Cell No.) 8766876128

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRAESODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - B/w - I |
|------------|-----------------|------------------|-----------|---|
| 220 | 14/11/22 | 600/- | | Roll No. 14 Reg. No. Year 2022/23 |

Remarks of the Selection Committee The candidate named above is/is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,

~~Principal~~
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in Child Counseling

..... for the Session 2022-2023

The necessary information for the admission is given below

- 1 Name in full - Gadhe Diksha Chintaman
(In Block Letters) Surname Name Middle Name
2. Mother Name Sharda gadhe
3. Father Name Chintaman gadhe
4. Date of Birth 9/5/2004
5. Caste : SC/ST/NT/SBC/OB/COPEN SC
6. Medium : Marathi / English Marathi
7. Present class B/w - I
8. Permanent Address A1 - Rembhota ta. Kaveri N. Jalgaon
(With Phone / Cell No.) 7769974816

Gadhe
Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Roll No. Reg. No. Year |
|------------|-----------------|------------------|-----------|---|
| 23/02/19 | 19/11/2022 | ₹.1200/- | | |

Remarks of the Selection Committee The candidate named above is/is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to **Certificate Course in** child counseling

..... for the Session 2022-2023

The necessary information for the admission is given below

1. Name in full - GARGE Surname SHOPNALI Name RAMANLAL Middle Name RAMANLAL
(In Block Letters)
2. Mother Name Ranjana
3. Father Name Ramanlal
4. Date of Birth
5. Case : SC/ST/NT/SBC/OBC/OPEN OPEN
6. Medium : Marathi / English English
7. Present class near Govat Bazar Yawal M A Yoga II
8. Permanent Address near Govat Bazar Yawal
(With Phone / Cell No.) 986135119 9552023578

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - child counseling Roll No. 25 Reg. No. Year 2022-23 |
|------------|-----------------|------------------|-----------|---|
| 280 | 18/11/22 | 500/- | | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon

Respected Sir,

I requested for the admission to Certificate Course in child counseling



..... for the Session 2022- 20 2 3

The necessary information for the admission is given below


- 1 Name in full - Jadhav Yogita Narayan
(In Block Letters) Surname Name Middle Name
2. Mother Name Bhikubai
3. Father Name Narayan
4. Date of Birth 18-06-1994
5. Caste : SC/ST/NT/SBC/OBC/OPEN OBC
6. Medium : Marathi / English Marathi
7. Present class _____
8. Permanent Address At/Post Patenda Tal. Chalisgaon Jalgaon
With Phone / Cell No.) 7620187711

Signature of the Applicant

Application Form

- To Certificate Course in Human Resource management
2) Certificate Course in N.C.O. Management
3) Certificate Course in Child Counselling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Child counselling Roll No. Reg. No. Year 2022-23 |
|------------|-----------------|------------------|--|---|
| 222 | 14/11/22 | 600 |  | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,

The Principal
Loksevak Mandukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in child Counselling.

for the Session 2022 - 2023

The necessary information for the admission is given below

1. Name in full : Kate Pratik Jitendra
(In Block Letters) Surname Name Middle Name
2. Mother Name Kate Sumita Jitendra
3. Father Name Kate Jitendra Nathu
4. Date of Birth 12/10/2000
5. Caste : SC/ST/NT/SBC/OBC/OPEN NT-C
6. Medium : Marathi / English Marathi
7. Present class M.S.W Tnd
8. Permanent Address At. Post. Sunargaan Tal. Bhusraval dist Jalgaon
(With Phone / Cell No.) 8180928600 / 9172603267

Signature of the Applicant





DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Roll No. Reg. No. Year |
|------------|----------------------|------------------|-----------|---|
| Ch / 257 | 12/08- 14/11/2022 | 1200/- | | |

Remarks of the Selection Committee The candidate named above is/is not recommended for admission

Admission Clerk

Coordinate

Principal

To,

~~Principal~~
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir:

I requested for the admission to Certificate Course in Child

Counseling for the Session 2022-2023

The necessary information for the admission is given below

1 Name in full - LULE BHUSHAN DEVENDRA
(In Block Letters) Surname Name Middle Name

2. Mother Name Vaishali

3. Father Name Devendra Sudhakar Lule

4. Date of Birth 06/08/1998

5. Caste : SC/ST/NT/SBC/OBC/OPEN OBC

6. Medium : Marathi / English Marathi

7. Present class 5.Y. BSM (BSM - 2nd year)

8. Permanent Address At. Post. Talvel Tal. Bhusaawal Dist. Jalgaon

(With Phone / Cell No.) 9881532505

Signature of the Applicant

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource Management
- 2) Certificate Course in N.C.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Child Counseling |
|-------------|-----------------|------------------|---|--------------------------------------|
| C10/202/236 | 21/11/2022 | RS 600/- |  | Roll No. Reg. No. Year 2021-22 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,

The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in Child Counseling for the Session 2022-2023

The necessary information for the admission is given below

1. Name in full - MAHAJAN KHUSROO VINOD
(In Block Letters) Surname Name Middle Name
2. Mother Name - MAHAJAN SIPALI VINOD
3. Father Name - MAHAJAN VINOD MADHUKAR
4. Date of Birth - 18/12/2001
5. Caste : SC/ST/NT/SBC/OBC/OPEN - OBC
6. Medium : Marathi / English - MARATHI
7. Present class - M.S.W. Ist YEAR
8. Permanent Address - JAGRUTI HOUSING SO. RAMANAD NAGAR JALGAON

(With Phone / Cell No.) 9834871957


Signature of the Applicant



APPLICANT FORM

- 1) Certificate Course in Human Resource Management
- 2) Certificate Course in N.C.O. Management
- 3) Certificate Course in Child Counselling

FOR OFFICE USE ONLY

| Receipt No. | Date of Payment | Amount Deposited | Signature | Class - Child Counselling |
|-------------|-----------------|------------------|---|------------------------------------|
| 001102 | 14-10-22 | 1200/- |  | Roll No Reg. No Year 2022-23 |

Remarks of the Selection Committee The candidate named above is not recommended for admission

Admission Clerk

Co-ordinate

Principal



To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon

Respected Sir,

I requested for the admission to Certificate Course in Child Counselling

for the Session 2021-2023

The necessary information for the admission is given below

- 1 Name in full - MAHAJAN SHIVANI MADHUKAR
(In Block Letters) Surname Name Middle Name
2. Mother Name MANDAKINI MAHAJAN
3. Father Name MADHUKAR MAHAJAN
4. Date of Birth 26 - 02 - 1995
5. Caste : SC/ST/NT/SBC/OBC/OPEN OBC
6. Medium : Marathi / English MARATHI
7. Present class MSW 2nd year
8. Permanent Address 118, Balaram, P. S. B., Jalgaon

(With Phone / Cell No.) 9528741042


Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - ^{Child} MSW-I |
|------------|-----------------|------------------|-----------|--|
| 102 | 15/11/22 | 600 | | Roll No. 34 Reg. No. Year 2021-22. |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,

Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in child counseling

for the Session 2022-2023

The necessary information for the admission is given below

1 Name in full - SHUBHAM SAMADHAN MOHATAN
(In Block Letters) Surname Name Middle Name

2. Mother Name Bramila

3. Father Name Samadhan

4. Date of Birth 19-8-2001

5. Caste : SC/ST/NT/SPC/OBC/OPEN OBC

6. Medium : Marathi / English marathi

7. Present class MSW I

8. Permanent Address Raver, Tal. Raver, Dist. Jalgaon

(With Phone / Cell No.) 9172956933

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Roll No. Reg. No. Year |
|-----------------|-----------------|------------------|-----------|---|
| 020/2024 251 | 10/11/22 | Rs 600/- | | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principa



To,

The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon

Respected Sir, I requested for the admission to Certificate Course in Child Counseling

..... for the Session 2022-2023

The necessary information for the admission is given below

1. Name in full - Manisha Surname Prakash Name Middle Name
2. Mother Name Manisha
3. Father Name Prakash
4. Date of Birth 11/04/2003
5. Caste SEST/NT/SBC/OBC/OPEN SC
6. Medium : Marathi / English Marathi
7. Present class B.S.W - II
8. Permanent Address A.H. Post. Dhani, Tal. Jawad,
(With Phone / Cell No.) 9730696007

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Roll No. Reg. No. Year |
|--------------|-----------------|------------------|-----------|---|
| 101/2022/257 | 11/11/2022 | 600/- | | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,

~~Principal~~
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in child counseling

..... for the Session 2022-2023

The necessary information for the admission is given below

- 1 Name in full - More Sakshi Nathu
(In Block Letters) Surname Name Middle Name
2. Mother Name Sangita
3. Father Name Nathu
4. Date of Birth 17/10/2002
5. Caste : SC/ST/NT/SBC/OBC/OPEN NT
6. Medium : Marathi / English Marathi
7. Present class BSc - IInd
8. Permanent Address Bijay Nagar, Pimpala road Jalgaon
(With Phone / Cell No.) 9222570175

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Child course |
|------------|-------------------------|------------------|-----------|--------------------------------------|
| C10/DC/260 | RS-1200/- 10/11/2022 | RS-1200/- | | Roll No. Reg. No. Year 2022-23 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,

~~Principal~~

Loksevak Madhuikarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in Child Counseling

..... for the Session 2022-2023

The necessary information for the admission is given below

- 1 Name in full - Nehruks Vaishali Sharda
(In Block Letters) Surname Name Middle Name
2. Mother Name Kalpanda
3. Father Name Sharda
4. Date of Birth 24/08/86
5. Caste : SC/ST/NT/SBC/OBC/OPEN OBC
6. Medium : Marathi / English Marathi
7. Present class
8. Permanent Address Ayodhya Nagra Jalgaon
(With Phone / Cell No.) 70 30 63 95 97

Signature of the Applicant

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - <i>Child Counseling</i> |
|---------------|-------------------|------------------|--------------------|---|
| <i>online</i> | <i>14-11-2022</i> | <i>1200</i> | <i>[Signature]</i> | Roll No. Reg. No. Year <i>2022-23</i> |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Pri



To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon

Respected Sir,

I requested for the admission to **Certificate Course in** *child Counseling*

for the Session 2022-2023

The necessary information for the admission is given below

- 1 Name in full - *NILE RAGHUNATH MANISHA*
(In Block Letters) Surname Name Middle Name
2. Mother Name *MEERABAI NILE*
3. Father Name *RAGHUNATH NILE*
4. Date of Birth *09-01-1990*
5. Caste : SC/ST/NT/SBC/OBC/OPEN *NT (c)*
6. Medium : Marathi / English *MARATHI*
7. Present class *MSW 2nd year*
8. Permanent Address *At post Nhani, Tal Yaval, Dis. Jalgaon*
(With Phone / Cell No.) *9373240424*

[Signature]
Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Roll No. Reg. No. Year |
|------------------------------------|-----------------|------------------|-----------|---|
| 1510/CHILD COUNSELING 2022-2023 | 11/11/22 | 0600/- | | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,

Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in Child Counseling

for the Session 2022-2023

The necessary information for the admission is given below

1 Name in full - RAJESH KISHOR RAJKUMAR
(In Block Letters) Surname Name Middle Name

2. Mother Name VIMALA

3. Father Name RAJKUMAR

4. Date of Birth 2-12-2004

5. Caste : SC/ST/NT/SBC/OBC/OPEN ST

6. Medium : Marathi / English Marathi

7. Present class BSW-1st year

8. Permanent Address At. post - Mhasgan toll-path dist - Neshik.

(With Phone / Cell No.) 93736620685

Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Roll No. Reg. No. Year |
|------------|-----------------|------------------|-----------|---|
| 97 | 12/11/22 | 600 | | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk _____ Co-ordinate _____ Principal _____

To,
 Principal
 Loksevak Madhukarrao Chaudhari
 College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in NGO child

~~Management~~ for the Session 2022-2023
Counseling

The necessary information for the admission is given below

- 1 Name in full - PANPATIL ROHAN MANOHAR
(In Block Letters) Surname Name Middle Name
- 2. Mother Name Panpatil Lata bai Manohar
- 3. Father Name P. Panpatil Manohar Bhivansan
- 4. Date of Birth 13-11-1994
- 5. Caste : SC/ST/NT/SBC/OBC/OPEN SC
- 6. Medium : Marathi / English Marathi
- 7. Present class 13th MSW I
- 8. Permanent Address Gat No. 175, Plot. No. 1 Shiram chavak Jalgaon
(With Phone / Cell No.) 9665089911

Signature of the Applicant



MAHARASHTRA STATE BOARD OF TECHNICAL EDUCATION
JALGAON

Jalgaon

College Code
1801/01

Registration No.
A



For College use
only

Course Applied For: C.T. SEM-IV C/P/05
Medium: MARATHI
Registration Date: 19/07/2022

Sample sheet No.
22/0000

1. Personal Information section

| Last Name | | First Name | | Middle Name |
|--------------------------------|--|----------------------|--|--------------------------|
| Name of Student: PATIL | | DARSHAN | | RAVESH |
| Father's Name: | | | | |
| Mother's Name: ADNA | | In-house Student: NO | | |
| Marital Status: UNMARRIED | | Serial No.: | | |
| Date of Birth: 07/08/2001 | | Gender: MALE | | |
| Place of Birth: RAVER | | Blood Group: A- | | |
| Grandfather's Name: | | Native Place: | | |
| Voter ID card No.: | | Organ Donor: NO | | |
| Bank Name: | | Account No.: | | Transaction Type: ONLINE |
| Religion: HINDU | | Nationality: INDIAN | | UDISE No.: |
| Aadhaar card No.: 615471546632 | | Driving Licence No.: | | Eligibility No.: |

2. Address Details

| | | | | |
|----------------------------|--|---|---------------|------------------|
| Address of Correspondence: | | AT MANGRUL POST KERHALE BK TAL RAVER DIST JALGAON | | Pin Code: 425508 |
| State: MAHARASHTRA | | District: JALGAON | Tehsil: RAVER | City: RAVER |
| Permanent Address: | | AT MANGRUL POST KERHALE BK TAL RAVER DIST JALGAON | | Pin Code: 425508 |
| State: MAHARASHTRA | | District: JALGAON | Tehsil: RAVER | City: RAVER |

3. Contact Details

| | | | |
|--|--|--------------------------------------|--|
| Student Mobile No.: 9834826638 | | Alternate Contact Number: 9834826638 | |
| Student Email Id: DARSHANPATIL5262@GMAIL.COM | | Parent phone: 9837074790 | |

4. Legal Reservation Information Section

| | | | | |
|------------------------|--|--------------------------|--|---------------------|
| Domicile state: | | Admission Category: OBC | | Caste Category: OBC |
| Caste: REVE GUJAR | | Phy. Handicapped: | | |
| Caste Certificate No.: | | Learning Disability No.: | | |

5. Social Reservation (Special Category) Information Section

| SR No. | SOCIAL RESERVATION NAME |
|--------|-------------------------|
| | |

Application Form

Certificate Course in

- 1) Certificate Course in Human Resource Management
- 2) Certificate Course in N.G.O. Management
- ✓ 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Roll No. Reg. No. Year |
|------------|-----------------|------------------|-----------|---|
| C10/DC/257 | 21/11/2022 | RS.600/- | AD | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principle

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in DNCVPS LoksevakMadhukarrao Chaudhari for the Session 2022-2023

The necessary information for the admission is given below

1 Name in full - Patil Jayashri Vishwanath
(In Block Letters) Surname Name Middle Name

2. Mother Name Alka Vishwanath Patil

3. Father Name Vishwanath Soma Patil

4. Date of Birth 22-07-1987

5. Caste : SC/ST/NT/SBC/OBC/OPEN CBC

6. Medium : Marathi / English Marathi

7. Present class B.S.W I st

8. Permanent Address Plot No-27 Mukund Nagar, Verangan

(With Phone / Cell No.) 9487331323

Signature of the Applicant

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource Management
- 2) Certificate Course in N.G.O. Management
- Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - <i>Child</i> |
|------------------|-------------------|------------------|--------------------|---|
| <i>E3/24/100</i> | <i>14/11/2022</i> | <i>Rs. 600/-</i> | <i>[Signature]</i> | Roll No. Reg. No. Year <i>2022-23</i> |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to **Certificate Course in** *Child Counseling*

for the Session 2022-2023

The necessary information for the admission is given below

1. Name in full - *PATEL* *JITENDRA* *YUVRAJ*
(In Block Letters) Surname Name Middle Name

2. Mother Name *YIMAL*

3. Father Name *PATEL* *YUVRAJ* *BALIRAM*

4. Date of Birth *20 June 2001*

5. Caste : SC/ST/NT/SBC/OBC/OPEN *NT-B*

6. Medium : Marathi / English *MARATHI*

7. Present class *AP- Vade tal. muletainager dist Jalgaon*

8. Permanent Address *AP- Vade tal. muletainager dist Jalgaon*

(With Phone / Cell No.) *9307098190*

[Signature]
Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- ✓ 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Roll No. Reg. No. Year |
|------------|-----------------|------------------|-----------|---|
| 263 | 14/11/22 | 0600/- | | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,

~~To~~ Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in child conseling

for the Session 2022-2023

The necessary information for the admission is given below

1 Name in full - Patil Jalit Vinod
(In Block Letters) Surname Name Middle Name

2. Mother Name Manisha Patil

3. Father Name Vinod Patil

4. Date of Birth 04/09/2004

5. Caste : SC/ST/NT/SBC/OBC/OPEN NT (VJA)

6. Medium : Marathi / English Marathi

7. Present class Bsw-I

8. Permanent Address At. Post. Jawleheda Tal & Dist Jalgaon.

(With Phone / Cell No.) 7350995391

Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- ✓ 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Roll No. Reg. No. Year |
|------------|-----------------|------------------|-----------|---|
| C310x195 | 12/11/22 | RS-600/- | | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,

The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in NGO child counseling
Management for the Session 2022-2023

The necessary information for the admission is given below

1 Name in full - ANIL B PAWAR ANIL NAVALSING
(In Block Letters) Surname Name Middle Name

2. Mother Name Bebhai Anand Navalsing Pawar

3. Father Name Navalsing Natthu Pawar

4. Date of Birth 23/05/2002

5. Caste : SC/ST/NT/SBC/OBC/OPEN VJNT

6. Medium : Marathi / English Marathi

7. Present class BSW 2nd year

8. Permanent Address Mandvechga tal. Bhusawal Dist. Jalgaon

(With Phone / Cell No.) 9689992974


Signature of the Applicant

Application Form

Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- ✓ 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - BSW - 3rd |
|------------|-----------------|------------------|--|---------------------------------|
| 264 | 14/11/22 | 600/- |  | Roll No. 22 Reg. No. Year |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in Child

Counseling for the Session 20 - 20

The necessary information for the admission is given below

1 Name in full - Pawar Lata Nilesh Lata
(In Block Letters) Surname Name Middle Name

2. Mother Name Kavita Lata Pawar

3. Father Name Lata Dhanraj Pawar

4. Date of Birth 21-01-2001

5. Caste : SC/ST/NT/SBC/OBC/OPEN NT

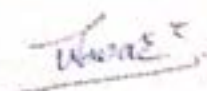
6. Medium : Marathi / English Marathi

7. Present class BSW - 3rd

8. Permanent Address At. Post. Kheolgaon, Tal. Erandol

(With Phone / Cell No.) 9518713522

Signature of the Applicant





LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF
SOCIAL WORK
Jalgaon

College Code:
LMCCSW

Application No.:
7



For College use
only

Course Applied For: CC CHILD COLINS
Medium: ENGLISH
Registration Date: 12/10/2022

Registration No.
2207230

1. Personal information section

| | Last Name | First Name | Middle Name |
|--------------------------------|----------------------|--------------------------|-------------|
| Name of Student | RAVERKAR | HRISHIKESH | VISHVESH |
| Father's Name | | | |
| Mother's Name: SHILPA | In-House Student: NO | | |
| Marital Status: UNMARRIED | SaraI No.: | | |
| Date of Birth: 27/04/2003 | Gender: MALE | | |
| Place of Birth: JALGAON | Blood Group: AB+ | | |
| Grandfather's Name: | Native Place: | | |
| Voter ID card No.: | Organ Donor: NO | | |
| Bank Name: | Account No.: | Transaction Type: ONLINE | |
| Religion: HINDU | Nationality: INDIAN | UDISE No.: | |
| Aadhaar card No.: 468153919455 | Driving Licence No.: | Eligibility No.: | |

2. Address Details

| | | | |
|----------------------------|---|-----------------|------------------|
| Address of Correspondence: | GANPATI NAGAR NEAR HOTEL CRAZY HOME JALGAON | | Pin Code: 425001 |
| State: MAHARASHTRA | District: JALGAON | Tehsil: JALGAON | City: JALGAON |
| Permanent Address: | GANPATI NAGAR NEAR HOTEL CRAZY HOME JALGAON | | Pin Code: 425001 |
| State: MAHARASHTRA | District: JALGAON | Tehsil: JALGAON | City: JALGAON |

3. Contact Details

| | |
|---|---------------------------|
| Student Mobile No.: 9518528101 | Alternate Contact Number: |
| Student Email Id: RAVKAR HRISHIKESH11@GMAIL.COM | Parent phone: 9552023578 |

4. Legal Reservation Information Section

| | | |
|------------------------|--------------------------|----------------------|
| Domicile state: | Admission Category: OPEN | Caste Category: OPEN |
| Caste: HINDU WANI | Phy. Handicapped: | |
| Caste Certificate No.: | Learning Disability No.: | |

5. Social Reservation (Special Category) Information Section

| SR No. | SOCIAL RESERVATION NAME |
|--------|-------------------------|
|--------|-------------------------|



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - <u>Child Counseling</u> |
|---------------|--------------------------------|------------------|-----------|---|
| <u>online</u> | <u>1200</u> <u>18-11-22</u> | <u>1200/-</u> | - | Roll No. Reg. No. Year <u>2022-23</u> |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in

Child Counseling

for the Session 2022-2023

The necessary information for the admission is given below

- 1 Name in full - Tadavi Asif Meharban
(In Block Letters) Surname Name Middle Name
2. Mother Name Tadavi Paitumbai Meharban
3. Father Name Tadavi Meharban Mahabub
4. Date of Birth 14-05-1997
5. Caste : SC/ST/NT/SBC/OBC/OPEN S.T.
6. Medium : Marathi / English Marathi
7. Present class MCW-I
8. Permanent Address At Moharab pest Bidgaon tal chhapda
(With Phone / Cell No.) 8698900298

Meharban
Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - ^{Child-Care} MSW II |
|------------|-----------------|------------------|-----------|---|
| 107 | 15/11/22 | 6000 | | Roll No. - 50 Reg. No. Year 2021-22 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in Child counselling

for the Session 2021-2022

The necessary information for the admission is given below

- 1 Name in full - Tadvi Muskan Ibrahim
(In Block Letters) Surname Name Middle Name
2. Mother Name Tadvi Beena Ibrahim
3. Father Name Tadvi Ibrahim Bashir
4. Date of Birth 24-04-2000
5. Caste : SC/ST/NT/SBC/OBC/OPEN ST
6. Medium : Marathi / English Marathi
7. Present class MSW - II
8. Permanent Address Juna Khedi Road, Jalgaon
(With Phone / Cell No.) 8459270260

Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Roll No. Reg. No. Year |
|------------------|-----------------|------------------|-----------|---|
| E10/2C/A/ 253 | 10/11/22 | Rs. 600/- | | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in child counseling

for the Session 2022-2023

The necessary information for the admission is given below

1. Name in full - Wankhede Nikita Rajendra
(In Block Letters) Surname Name Middle Name
2. Mother Name Gunanda
3. Father Name Rajendra
4. Date of Birth 09/05/2003
5. Caste : SC/ST/NT/SBC/OBC/OPEN SC
6. Medium : Marathi / English marathi
7. Present class BSW- II
8. Permanent Address Aanand Nagar, Shenduzni
(With Phone / Cell No.) 7666563938

Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Roll No. Reg. No. Year |
|------------|-----------------|------------------|-----------|---|
| 20724/24 | 8/10/18 | ₹.1200/- | | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
College of Social Work, Jalgaon



Respected Sir,
I requeste

for the admission to Certificate Course in H.R.M.

for the Session 2018-2019

The necessary information for the admission is given below

1. Name in full : Bogul Bogul Ashok
(In Black Letters) Surname Name Middle Name

2. Mother Name Karnal Ashok Bogul

3. Father Name Ashok Bhalchandra Bogul

4. Date of Birth 10 Jun 1995

5. Caste: SC/ST/NT/SBC/OBC/OPEN S.C

6. Medium: Marathi / English Marathi

7. Present class MS.W II year

8. Permanent Address At Sakut Post Devgat tal. Mahyasa dist. Nashik

(With Phone / Cell No.) M.No 9984014450

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

LD-1070

HRM

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - MSW-II |
|------------|-----------------|------------------|-----------|---|
| 11/24/734 | 9/10/18 | RS.600/- | | Roll No. 05 Reg. No. Year - 2018-19 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon



Respected Sir,
I requeste

d for the admission to Certificate Course in Human Resource Management

----- for the Session 2018-2019

The necessary information for the admission is given below

1 Name in full - BHAVSAR VIVEK PRAMOD
(In Block Letters) Surname Name Middle Name

2. Mother Name KUNDA

3. Father Name PRAMOD

4. Date of Birth 17-02-1994

5. Caste : SC/ST/NT/SBC/OBC/OPEN OBC

6. Medium : Marathi / English MARATHI

7. Present class MSW-II

8. Permanant Address Plot.No.2 Gat.No.91/2 Abhishek auto Garage,
(With Phone / Cell No.) Dadawadi, Jalgaon - 7721090900

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

ID-1032

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - HRM Roll No. Reg. No. Year 2018-19 |
|------------|-----------------|------------------|-----------|---|
| CIDC/644 | 29/9/18 | RS 400/- | | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon



Respected Sir,
I requeste

d for the admission to Certificate Course in Human Resource
management for the Session 2018-2019

The necessary information for the admission is given below

1 Name in full - Bhoi payal Uttam
(In Block Letters) Surname Name Middle Name

2. Mother Name Sunita Uttam Bhoi

3. Father Name Uttam Shivram Bhoi

4. Date of Birth 14-10-1998

5. Caste : SC/ST/NT/SBC/OBC/OPEN NT-B

6. Medium : Marathi / English Marathi

7. Present class Ty Bsw

8. Permanant Address At. post - Ganesh wadi pachara road, Jamne

(With Phone / Cell No.) 9637412524

P. Bhoi
Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

ID-1024

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - FIRM |
|------------|-----------------|------------------|-----------|--------------------------------------|
| C1001632 | 29/9/18 | RS-600/- | | Roll No. Reg. No. Year 2018-19 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon



Respected Sir,
I requeste

d for the admission to Certificate Course in Human Resource Management

for the Session 2018-2019

The necessary information for the admission is given below

1 Name in full - DEVE Dinkarsing Adharsing
(In Block Letters) Surname Name Middle Name

2. Mother Name Sunandabai

3. Father Name Adharsing

4. Date of Birth 02/08/1996

5. Caste : SC/ST/NT/SBC/OBC/OPEN open

6. Medium : Marathi / English Marathi

7. Present class M.S.VV-I

8. Permanant Address A1. Highkazi, Dist. Jalgaon, Tal. Makapur, Dist. Buldhara,
(With Phone / Cell No.) 8788225060

Signature of the Applicant

D.A. DEVE



COLLEGE OF SOCIAL WORK, JALGAON

Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

ID-1043

HRM

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - MSW-I HRM |
|------------|-----------------|------------------|-----------|------------------------------|
| C13X/655 | 29/9/18 | RS 500/- | | Roll No. 42 |
| | | | | Reg. No. |
| | | | | Year 2018-19 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon



Respected Sir,
I requeste

d for the admission to Certificate Course in Human Resource management

..... for the Session 2018-2019

The necessary information for the admission is given below

1. Name in full - Khairnar Vaishnavi Kisan
(In Block Letters) Surname Name Middle Name

2. Mother Name Khairnar Radhabai Kisan

3. Father Name Khairnar Kisan Gokul

4. Date of Birth 06/02/1997

5. Caste : SC/ST/NT/SBC/OBC/OPEN OBC

6. Medium : Marathi / English Marathi

7. Present class MSW-I

8. Permanant Address Anturli : Tal : Muktainagar : Dist : Jalgaon

(With Phone / Cell No.) 9284130173

Vhaience
Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Roll No. Reg. No. Year |
|------------|-----------------|------------------|-----------|---|
| e/3c/627 | 29/9/18 | ₹.1200/- | | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon



Respected Sir,
I requeste

d for the admission to Certificate Course in Human Resource
Management for the Session 2018-2019

The necessary information for the admission is given below

- 1 Name in full - Mali Virthal Bhagwan
(In Block Letters) Surname Name Middle Name
2. Mother Name Mali Masalabai Bhadwan
3. Father Name Mali Bhadwan Chavda
4. Date of Birth 20-04-1996
5. Caste : SC/ST/NT/SBC/OBC/OPEN OBC
6. Medium : Marathi / English Marathi
7. Present class M.S.W - I
8. Permanant Address AT. Hiranakazi Post. Bhalegan (Run) Tal. Malkapur Dist. Buldhana
(With Phone / Cell No.) 7757958918

Signature of the Applicant


DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
COLLEGE OF SOCIAL WORK, JALGAON

Application Form

For the Admission of Certificate Course in

- ✓ 1) Certificate Course in Human Resources management.
2) Certificate Course in Child Counseling
3) Certificate Course in 'NGO Management'

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - HRM Roll No. Reg. No. Year 2015-16 2018-19 |
|------------|-----------------|------------------|--|--|
| C1/DC/543 | 25/9/2018 | RS 200/- |  | |

Remarks of the Selection Committee
The candidate named above is /is not recommended for admission

ID - 1005

Admission Clerk

Co-ordinate

Principal

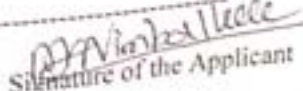
To,
The Principal
college of Social Work, Kusumba, Jalgaon



Respected Sir,

I requested for the admission to the _____ Course
for the Session 2015-16. 2018-19
The necessary information for the admission is given below

- 1 Name in full - NIMBALKAR MAYURESH SHALIGRAM
(In Block Letters) Surname Name Middle Name
2. Mother Name ALKA SHALIGRAM NIMBALKAR
3. Father Name SHALIGRAM SHENFADU NIMBALKAR
4. Date of Birth 10/11/1992
5. Caste : SC/ST/NT/SBC/OBC/OPEN SC 6. Medium : Marathi / English Marathi
7. Educational Qualification BA, MA English
8. Permanant Address Plot No: 32/2 Shreegaruda Hanagar, Jalgaon
- (With Phone / Cell No.) 8983343148


Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

ID-1049

HRM

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - MSW - II nd |
|------------|-----------------|------------------|-----------|--|
| C/DC/643 | 1/10/18 | ₹1200/- | | Roll No. 304 Reg. No. Year 2018-19 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,

The Principal
College of Social Work, Jalgaon



Respected Sir, I requeste

d for the admission to **Certificate Course in Human Resource**

Management for the Session 2017-2018

The necessary information for the admission is given below

- 1 Name in full - **MAPATHE MINAKSHEE PRAKASH**
(In Block Letters) Surname Name Middle Name
2. Mother Name **MAPATHE USHA PRAKASH**
3. Father Name **MAPATHE PRAKASH SHANKAR**
4. Date of Birth **03.11.1996**
5. Caste : SC/ST/NT/SBC/OBC/OPEN **OBC**
6. Medium : Marathi / English **Marathi**
7. Present class **MSW - IInd year**
8. Permanent Address **Daiiv Pathi Nagar, Sakda Road, Raver**
(With Phone / Cell No.) **9175917649**

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- ✓ 1) Certificate Course in Human Resource management
2) Certificate Course in N.G.O. Management
3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

ID-1040

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - B.S.W-III Roll No. 21 Reg. No. Year 2018/19. |
|------------|-----------------|------------------|-----------|---|
| C/DC/652 | 29/9/18 | ₹600/- | | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon



Respected Sir, I requeste

d for the admission to Certificate Course in Human Resource
Management for the Session 201 -201

The necessary information for the admission is given below

- 1 Name in full - prathal punam yuvraj
(In Block Letters) Surname Name Middle Name
2. Mother Name prathal Bhawali yuvraj
3. Father Name prathal yuvraj yushawant.
4. Date of Birth 22/06/1998
5. Caste : SC/ST/NT/SBC/OBC/OPEN
6. Medium : Marathi / English
7. Present class B.S.W-III
8. Permanent Address At post chenchale tal jalgaon Dist. Jc.
(With Phone / Cell No.) 860055075

Signature of the Applicant





Application Form

For the Admission of Certificate Course in

- ✓ 1) Certificate Course in Human Resource management
 ✓ 2) Certificate Course in N.G.O. Management
 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

ID-1055

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - HRM |
|------------|-----------------|------------------|-----------|--------------------------------------|
| 11/04/2018 | 3/10/18 | RS-500/- | | Roll No. Reg. No. Year 2018-19 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
College of Social Work, Jalgaon



TULASIRAM H. RATHOD
19-03-2018

Respected Sir,

I requeste

d for the admission to Certificate Course in HRM

for the Session 201 -201

The necessary information for the admission is given below

1. Name in full - RATHOD TULASIRAM HARICHAND
(In Block Letters) Surname Name Middle Name
2. Mother Name NYALOBATI
3. Father Name RATHOD HARICHAND DONGARSING
4. Date of Birth 03-10-
5. Caste : SC/ST/NT/SBC/OBC/OPEN
6. Medium : Marathi / English
7. Present class MSW-I
8. Permanant Address AT POST-KHERDETANDATA TAL-CHALISGAON
(With Phone / Cell No.) DESI-JALGAON - 8390621951

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- ✓ 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

ID-1034

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - B.S.W HKM |
|------------|-----------------|------------------|-----------|---|
| e/DC/646 | 29/9/18 | Rs 600/- | | Roll No. 28 Reg. No. Year 2018-19 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon

Respected Sir,
I requeste

d for the admission to Certificate Course in Human

Resource Management for the Session 2018-2019

The necessary information for the admission is given below

- 1 Name in full - Saindane Diksha Narendra
(In Block Letters) Surname Name Middle Name
 2. Mother Name Yogita Narendra Saindane
 3. Father Name Narendra Rambhau Saindane
 4. Date of Birth 25/12/1998
 5. Caste : SC/ST/NT/SBC/OBC/OPEN OBC
 6. Medium : Marathi / English Marathi
 7. Present class T.Y B.S.W
 8. Permanant Address A Post Talgaon
- (With Phone / Cell No.) 8766776613

Signature of the Applicant

DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
COLLEGE OF SOCIAL WORK, JALGAON


Application Form

For the Admission of Certificate Course in

- ✓ 1) Certificate Course in Human Resources management.
2) Certificate Course in Child Counseling
3) Certificate Course in 'NGO Management'

FOR OFFICE USE ONLY

ID-1005

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - HRM |
|------------|-----------------|------------------|---|------------------------------------|
| | | | | Roll No. |
| | | | | Reg. No. |
| | | | | Year 2015-16 2018-19 |
| C1/20/542 | 24/9/18 | ₹51000/- |  | |

Remarks of the Selection Committee

The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work , Kusumba , Jalgaon



Respected Sir,

I requested for the admission to the Human Resources management course
for the Session ~~2015-16~~: 2018-19
The necessary information for the admission is given below

1 Name in full - Shikshath Akshay Vijay
(In Block Letters) Surname Name Middle Name

2. Mother Name Kalpuna Vijay Shikshath

3. Father Name Vijay Hari Shikshath

4. Date of Birth 30/12/1995

5. Caste : SC/ST/NT/SBC/OBC/OPEN SC 6. Medium : Marathi / English Marathi

7. Educational Qualification MSW II nd Year

8. Permanant Address at. post. Wark Ter. bhudgaon dist. Jalgaon

(With Phone / Cell No.) 9823153166


Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

ID-1050

| | | | | |
|------------|-----------------|------------------|-----------|--------------|
| Receipt No | Date of Payment | Amount Deposited | Signature | Class - HRM |
| 001677 | 11/10/18 | 5000 | | Roll No. |
| | | | | Reg. No. |
| | | | | Year 2018-19 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk _____ Co-ordinate _____ Principal _____

To,
The Principal
college of Social Work, Jalgaon



Respected Sir,
I requeste

d for the admission to Certificate Course in Human Resource management

_____ for the Session 2018-2019

The necessary information for the admission is given below

1 Name in full - SURYAWANSHI ROHAN SANTOSH
(In Block Letters) Surname Name Middle Name

2. Mother Name MEENABAI

3. Father Name SANTOSH NILKANTH SURYAWANSHI

4. Date of Birth 21 Jan 1996

5. Caste : SC/ST/NT/SBC/OBC/OPEN OBC

6. Medium : Marathi / English Marathi

7. Present class MSW-I

8. Permanant Address AT/POST - MARWAD TAL - AMALNER

(With Phone / Cell No.) EDIST - JALGAON - 9156895450

RCS
Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
 2) Certificate Course in N.G.O. Management
 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

ID-1020

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - HRM Roll No. Reg. No. Year 2018-19 |
|------------|-----------------|------------------|-----------|---|
| e11/0c/628 | 29/9/2018 | Rs 300/- | | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon



Respected Sir,
I requeste

d for the admission to Certificate Course in Human Resource Management for the Session 2018-2019

The necessary information for the admission is given below

- 1 Name in full - TAYADE ANKIT DNYANESHWAR
(In Block Letters) Surname Name Middle Name
2. Mother Name SHARADA
3. Father Name DNYANESHWAR
4. Date of Birth 19/09/1996
5. Caste : SC/ST/NT/SBC/OBC/OPEN SC
6. Medium : Marathi / English MARATHI
7. Present class M.S.W - IInd YEAR
8. Permanant Address AT. NEHETA TAL. RAVER DIST. JALGAON
(With Phone / Cell No.) 7798231946

Signature of the Applicant



COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
2) Certificate Course in N.G.O. Management
3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

ID-1048

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - HRM Roll No. Reg. No. Year 2018-19 |
|------------|-----------------|------------------|-----------|---|
| C1/DC/673 | 11/10/18 | 500/- | | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon



Respected Sir,
I requeste

d for the admission to Certificate Course in HRM

for the Session 201 -201

The necessary information for the admission is given below

- 1 Name in full - Thakur Madhuj Gajanan
(In Block Letters) Surname Name Middle Name
2. Mother Name Usha Gajanan Thakur
3. Father Name Gajanan Jagannath Thakur
4. Date of Birth 12/09/1996
5. Caste : SC/ST/NT/SBC/OBC/OPEN _____
6. Medium : Marathi / English Marathi
7. Present class MSW-F1
8. Permanent Address _____
(With Phone / Cell No.) 9284793359

Signature of the Applicant



COLLEGE OF SOCIAL WORK, JALGAON

Accredited 'A' Grade Institute by the NAAC

Application Form

or the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Roll No. Reg. No. Year |
|------------|-----------------|------------------|-----------|---|
| C/126/620 | 29/9/18 | 500/- | | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon



Respected Sir,
I requeste

d for the admission to Certificate Course in Human
Resource mangament for the Session 201 -201

The necessary information for the admission is given below

1. Name in full - VADAR GANESH BARKU
(In Block Letters) Surname Name Middle Name
2. Mother Name ANITA BARKU VADAR.
3. Father Name BARKU BANDU VADAR.
4. Date of Birth 11/08/1995
5. Caste : SC/ST/NT/SBC/OBC/OPEN NT.
6. Medium : Marathi / English MARATHI, ENGLISH.
7. Present class MSW-II.
8. Permanant Address AT-Pol-shedumital-Jamner.
(With Phone / Cell No.) 9561508497.

Signature of the Applicant

Annexure-A

List of admitted students for Career Oriented Courses under Ordinance 181

- 1) Name of the College - Dhanaji Nana Chaudhari Vidya Prabodhini's Loksevak Madhukarrao Chaudhari College of Social Work , Jalgaon
- 2) Name of Career oriented Course - Certificate Course in Human Resource Management
- 3) Academic Year - 2018 - 2019
- 4) Intake Capacity - 60

| Sr. No. | Full name of the Students | Gender | Category | Educational Qualification # | Year of passing- Cert./Diploma Course (Applicable only for Diploma & Adv. Diploma Course) | Presently admitted Class (F.Y.,S.Y.,T.Y./P.G. | Remark (If Any) |
|---------|------------------------------|--------|----------|-----------------------------|---|--|------------------|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| 1 | BAGUL SAGAR ASHOK | MALE | SC | XII | | | |
| 2 | BHAYSAR VIVEK PRAMOD | MALE | OBC | XII | | | |
| 3 | BHOI PAYAL UTTAM | FEMALE | NT | XII | | | |
| 4 | DEVARE DWANSHING AADHARSING | MALE | OPEN | XII | | | |
| 5 | KHURNAR VAISHNAVI KISAN | FEMALE | OBC | XII | | | |
| 6 | MALVITIMAL BHAGWAN | MALE | OBC | XII | | | |
| 7 | MARATHE MINAKSHEE PRANASH | FEMALE | OPEN | XII | | | |
| 8 | NIMBALKAR MAYURESH SHALIGRAM | MALE | SC | XII | | | |
| 9 | PATIL PUNAM YUVARAJ | FEMALE | OPEN | XII | | | |
| 10 | RATHOD TULASIRAM HARICHANDRA | MALE | NT | XII | | | |
| 11 | SAINDANE DIKSHA NARENDRA | FEMALE | OBC | XII | | | |
| 12 | SHIRSATH AKSHAY VIJAY | MALE | SC | XII | | | |
| 13 | SURYAVANSHI ROHAN SANTOSH | MALE | ST | XII | | | |
| 14 | TAYADE ANKIT DNYANESHWAR | MALE | SC | XII | | | |
| 15 | THAKARE MADHURI GAJAMAN | FEMALE | ST | XII | | | |
| 16 | WADAR GANESH BARKU | MALE | NT | XII | | | |

CERTIFICATE

certify that the documents regarding educational qualifications of the above students have been verified and found correct. The students mentioned in the list are eligible for the admission to the above mentioned course as per university ordinance-181.

This is to

Prof. Dr. Rakesh P. Chaudhari
Co-ordinator
Mobile No. - 9822768902



Dhanaji Nana Chaudhari Vidya Prabodhini
**LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK,
JALGAON**

Student Admission Report

From Date 01/06/2019 To 28/09/2019

Section : 2019-2020

Course : CCHRM

| No. | Roll No | Student Id | STUDENT NAME |
|---------------|---------|------------|---------------------------|
| CCHRM | | | |
| Section : --- | | | |
| | | 2144030 | BAVISKAR NINA NARENDRA |
| | | 2144009 | BRAMHANE DIPAK SHANTARAM |
| | | 2170101 | CHAVAN SANDIP APPA |
| | | 2144016 | DEORE JAYASHREE RAVINDRA |
| | | 2144099 | DHANGAR DIPAK KAILAS |
| | | 2144095 | DHANGAR PANKAJ KAILAS |
| | | 2178012 | JOSHI ANANT PRAMOD |
| | | 2144027 | MALI CHETAN ARJUN |
| | | 2144025 | MALI MAYUR BAPU |
| | | 2144021 | NIKUM NILESH NARAYAN |
| | | 2144034 | PARDESHI MAYURI RAJENDRA |
| | | 2177466 | PATIL KANCHAN SOPAN |
| | | 2144036 | SHINDE VAISHALI BALASAHEB |
| | | 2144678 | SONAWANE SUNIL DEVIDAS |
| | | 2145553 | TAYADE RAHUL NARAYAN |
| | | 2144452 | VALAVI PRITAM KRISHNA |
| | | 2178018 | WADHE RAJASHRI SURESH |
| | | 2144415 | WAGH SAVITA PRAKASH |



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- ✓ 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - HRM Roll No. Reg. No. Year 2019-20 |
|------------|-----------------|------------------|-----------|---|
| 010/279 | 14/9/19 | RS-1200/- | | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal -

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in Human Resource
Management for the Session 2019-2020

The necessary information for the admission is given below

- 1 Name in full - BRAMHANE DIPAK SHANTARAM
(In Block Letters) Surname Name Middle Name
2. Mother Name BRAMHANE ANJANA SHANTARAM
3. Father Name BRAMHANE SHANTARAM PRALHAD
4. Date of Birth 10/05/1995
5. Caste : SC/ST/NT/SBC/OBC/OPEN SC
6. Medium : Marathi / English MARATHI
7. Present class MSW - IInd
8. Permanent Address AT - BRAMHANE POST - UPRAN TAL ERANDOL
(With Phone / Cell No.) 7798245970 (702063277)

Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- ✓ 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| | | | | |
|------------|-----------------|------------------|-----------|--------------|
| Receipt No | Date of Payment | Amount Deposited | Signature | Class - HRM |
| CIC/284 | 14/9/2019 | RS.1200/- | | Roll No. |
| | | | | Reg. No. |
| | | | | Year 2019-20 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk _____ Co-ordinate _____ Principal _____

To,
 The Principal
 Loksevak Madhukarrao Chaudhari
 College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in HRM

_____ for the Session 2019-2020

The necessary information for the admission is given below

- 1 Name in full - BAVISKAR NINA NARENDRA
(In Block Letters) Surname Name Middle Name
2. Mother Name BAVISKAR KALPANA NARENDRA
3. Father Name BAVISKAR NARENDRA CHANDRAKANTH
4. Date of Birth 27-01-1996
5. Caste : SC/ST/NT/SBC/OBC/OPEN SBC
6. Medium : Marathi / English MARATHI
7. Present class MSW- Ind
8. Permanent Address AP- POST-TAL-DIST-JALGAON, GANESH NAGAR JALGAON
(With Phone / Cell No.) 9373981983

Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - HRM Roll No. Reg. No. Year 2019-20 |
|------------|-----------------|------------------|--------------------|---|
| 018/250 | 14/11/2019 | 85500/- | <i>(Signature)</i> | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
 The Principal
 Loksevak Madhukarrao Chaudhari
 College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to **Certificate Course in HUMAN RESOURCE MANAGEMENT**

for the Session 2019-2020

The necessary information for the admission is given below

- 1 Name in full - DILORE JAYAGHREE RAVINDRA
 (In Block Letters) Surname Name Middle Name
2. Mother Name DILORE MANISHA RAVINDRA
3. Father Name DILORE RAVINDRA HARISING
4. Date of Birth 03-06-1996
5. Caste : SC/ST/NT/SBC/OBC/OPEN NT-VJ
6. Medium : Marathi / English MARATHI
7. Present class M.S.V. II YEAR
8. Permanent Address AT POST- GANESHPUR PIMPRI TAL- CHHUVA
 (With Phone / Cell No.) 225- JALGAON 9360341342, 9579898382

(Signature)
 Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- ✓ 1) Certificate Course in Human Resource management
2) Certificate Course in N.G.O. Management
3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - H.R.M |
|------------|-----------------|------------------|-----------|--------------------------------------|
| 209 | 14/1/19 | 600 | | Roll No. Reg. No. Year 2019-20 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Dipak Kailas Dhangar
21.02.2019

Respected Sir,

I requested for the admission to Certificate Course in -----

H.R.M for the Session 2019-2020

The necessary information for the admission is given below

- 1 Name in full - DHANGAR DIPAK KAILAS
(In Block Letters) Surname Name Middle Name
2. Mother Name RATNABAI KAILAS DHANGAR
3. Father Name KAILAS AMRUT DHANGAR
4. Date of Birth 16/05/1996
5. Caste : SC/ST/NT/SBC/OBC/OPEN NT - C
6. Medium : Marathi / English MARATHI
7. Present class N.S.W - I
8. Permanent Address Jankhede ku. Tal Brandol Dist Jalgaon
(With Phone / Cell No.) 7776906441 , 8208514204

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
2) Certificate Course in N.G.O. Management
3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - HRM |
|------------|-----------------|------------------|-----------|--------------------------------------|
| 227 | 11/9/14 | 600 | | Roll No. Reg. No. Year 2019-20 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in

HRM for the Session 2019-2020

The necessary information for the admission is given below

- 1 Name in full - DHANGAR PANKAJ KAILAS
(In Block Letters) Surname Name Middle Name
2. Mother Name RATNABAI KAILAS DHANGAR
3. Father Name KAILAS AMRUT DHANGAR
4. Date of Birth 06/05/1994
5. Caste : SC/ST/NT/SBC/OBC/OPEN NT - C
6. Medium : Marathi / English MARATHI
7. Present class MSW - II
8. Permanent Address Javkhede kh. Tel. erandol dist Jalgaon
(With Phone / Cell No.) 7776886870

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - M. S. W II |
|------------|-----------------|------------------|-----------|--------------------|
| C10/311 | 24/9/2019 | ₹.1200/- | | Roll No. 69 |
| | | | | Reg. No. |
| | | | | Year 2019-20 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in HUMAN RESOURCE

Management for the Session 2019-2020

The necessary information for the admission is given below

1 Name in full - Joshi Anant Pramod
(In Block Letters) Surname Name Middle Name

2. Mother Name Joshi Yashodabai Pramod.

3. Father Name Joshi Pramod Bhaywan.

4. Date of Birth 03-08-1993

5. Caste : SC/ST/NT/SBC/OBC/OPEN NT (B)

6. Medium : Marathi / English Marathi

7. Present class M.S.W II year

8. Permanent Address 36k New Joshi colony, Pani Tanki sumor Jalgaon

(With Phone / Cell No.) 8484842765 / 9595952765

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - HRM |
|------------|-----------------|------------------|-----------|--------------------------------------|
| C10/283 | 14/9/2019 | Rs.1200/- | | Roll No. Reg. No. Year 2019-20 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in H.R.M

for the Session 2019-2020

The necessary information for the admission is given below

- 1 Name in full - MALI CHETAN ARJUN
(In Block Letters) Surname Name Middle Name
2. Mother Name MALI KALPANA ARJUN
3. Father Name MALI ARJUN VITTHAL
4. Date of Birth 08-04-1997
5. Caste : SC/ST/NT/SBC/OBC/OPEN OBC
6. Medium : Marathi / English MARATHI
7. Present class MSW - IInd JANTA NAGAR
8. Permanent Address AT. POST. TAL. SHINDKHEDA DC DHULE
(With Phone / Cell No.) 8999545626

Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- ✓ 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - HRM |
|------------|-----------------|------------------|-----------|--------------------------------------|
| C10/282 | 14/9/2019 | ₹.1200/- | | Roll No. Reg. No. Year 2019-20 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in HRM

for the Session 2019-2020

The necessary information for the admission is given below

- 1 Name in full - MALI MAYUR BAPU
(In Block Letters) Surname Name Middle Name
2. Mother Name MALI SUNITA BAPU
3. Father Name MALI BAPU NARAYAN
4. Date of Birth 30/06/1995
5. Caste : SC/ST/NT/SBC/OBC/OPEN OBC
6. Medium : Marathi / English MARATHI
7. Present class MSW IInd
8. Permanent Address AT-POST- KINARCHI TAL ERANDOL DIST-JALGAON
(With Phone / Cell No.) 9359007630, 8600304245

Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- ✓ 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - HRM |
|------------|-----------------|------------------|-----------|------------------------------|
| C10/281 | 14/9/2019 | Rs 1200/- | | Roll No. Reg. No. Year |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in H. R.

M. for the Session 2019-2020

The necessary information for the admission is given below

1 Name in full - NEKUM NITESH NARAYAN
(In Block Letters) Surname Name Middle Name

2. Mother Name NEKUM PRAMILA NARAYAN

3. Father Name NEKUM NARAYAN PITAMBAR

4. Date of Birth 01/06/1996

5. Caste : SC/ST/NT/SBC/OBC/OPEN OBC

6. Medium : Marathi / English MARATHI

7. Present class MSW - IInd

8. Permanent Address AT-POST- BHADANE TAL- SHINDKHEDA - DHULE

(With Phone / Cell No.) 9579 222296

Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - HRM Roll No. Reg. No. Year 2019-20 |
|------------|-----------------|------------------|-----------|---|
| C10/255 | 14/9/2019 | ₹500/- | | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in Human Resource
management for the Session 2019-2020

The necessary information for the admission is given below

1. Name in full - PARDISHI MAYURI RAJENDRA
(In Block Letters) Surname Name Middle Name
2. Mother Name CHAYYA
3. Father Name RAJENDRA BHAVSING PARDISHI
4. Date of Birth 12-05-1998
5. Caste : SC/ST/NT/SBC/OBC/OPEN VI/NT
6. Medium : Marathi / English Marathi
7. Present class MISW - II
8. Permanent Address IAT KISAN COLONY, PACHORA
(With Phone / Cell No.) 9834557543, 7448008514

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Roll No. Reg. No. Year |
|------------|-----------------|------------------|-----------|---|
| C10/308 | 23/9/2019 | Rs. 1200/- | | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in _____

HRM for the Session 2019-2020

The necessary information for the admission is given below

- 1 Name in full - PATIL KANCHAN SOPAN
(In Block Letters) Surname Name Middle Name
2. Mother Name PATIL KAVITA SOPAN
3. Father Name PATIL SOPAN PRALHAD
4. Date of Birth 21-10-1997
5. Caste : SC/ST/NT/SBC/OBC/OPEN OBC
6. Medium : Marathi / English MARATHI
7. Present class MSW-IInd year
8. Permanent Address At Post- CHANDHASAR TAL- DHARNGOAN
(With Phone / Cell No.) 7030894445

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - HRM Roll No. Reg. No. Year 2019-20 |
|------------|-----------------|------------------|-----------|---|
| C10/286 | 14/9/2019 | RS.500/- | | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon

Respected Sir,

I requested for the admission to Certificate Course in HUMAN RESOURCE
MANAGEMENT for the Session 201 -201

The necessary information for the admission is given below

- 1 Name in full - SHINDE VAISHALI BALASAHEB
(In Block Letters) Surname Name Middle Name
2. Mother Name SHINDE USHA BALASAHEB
3. Father Name SHINDE BALASAHEB BARKU
4. Date of Birth 30-4-1997
5. Caste : SC/ST/NT/SBC/QBC/OPEN OBC
6. Medium : Marathi / English MARATHI
7. Present class M.S.W. II YEAR
8. Permanent Address AT POST - GANESH PUR TAL- CHALISBAON
(With Phone / Cell No.) DIS - JALGAON 7620417626, 7028691935

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in-

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - <u>H.R.M</u> |
|------------|-----------------|------------------|-----------|---|
| <u>50</u> | <u>16/9/19</u> | <u>600</u> | | Roll No. Reg. No. Year <u>19.20</u> |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in Human Resource

Management (H.R.M.) for the Session 2019-2020

The necessary information for the admission is given below

1 Name in full - SONAWANE SUNIL DEVIDAS
(In Block Letters) Surname Name Middle Name

2. Mother Name GAUKARNABAT DEVIDAS SONAWANE

3. Father Name D. SONAWANE DEVIDAS RAMDAS

4. Date of Birth 03/08/2019

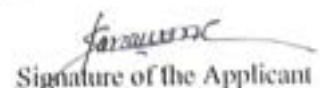
5. Caste : SC/ST/NT/SBC/OBC/OPEN OBC

6. Medium : Marathi / English MARATHI

7. Present class MSW - II, IIIrd SEM

8. Permanent Address AT/POST - SUNASGAON BK, TAL - JAMNER, DIST JALGAON

(With Phone / Cell No.) 8208944830, 7588814454


Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - MSW |
|------------|-----------------|------------------|-------------|-------------|
| 892 | 12/11/19 | 600 | [Signature] | Roll No. 77 |
| | | | | Reg. No. |
| | | | | Year |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in Human Resource

Management for the Session 2019-2020

The necessary information for the admission is given below

1 Name in full - TAYADE RAHUL NARAYAN
(In Block Letters) Surname Name Middle Name

2. Mother Name TAYADE MANGALA NARAYAN

3. Father Name TAYADE NARAYAN NAMADEV

4. Date of Birth 27/10/1996

5. Caste : SC/ST/NT/SBC/OBC/OPEN SBC

6. Medium : Marathi / English MARATHI

7. Present class MSW - 2nd year.

8. Permanent Address AT POST MOHADI, FRONT OF GRAMPANCHA

(With Phone / Cell No.) TAL & DIST JALGAON 425002

9975478743

[Signature]
Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- ✓ 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - <i>HRM</i> Roll No. Reg. No. Year <i>1920</i> |
|------------|-----------------|------------------|--------------------|--|
| <i>46</i> | <i>16/11/19</i> | <i>1200/-</i> | <i>[Signature]</i> | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in Human Resource management for the Session 2019-2020

The necessary information for the admission is given below

- 1 Name in full - VALAVI PRITAM KRISHNA.
(In Block Letters) Surname Name Middle Name
2. Mother Name SHOBHA
3. Father Name KRISHNA
4. Date of Birth 10/03/1991
5. Caste : SC/ST/NT/SBC/OBC/OPEN ST.
6. Medium : Marathi / English marathi
7. Present class MSW 2nd year.
8. Permanent Address 22/A, Vivekanand Nagar, Jalgaon pin.- 425002
(With Phone / Cell No.) 9503209454

[Signature]
Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Roll No. Reg. No. Year |
|------------|-----------------|------------------|-----------|---|
| C10/312 | 24/9/2019 | RS.1200/- | | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in Human

Resource management for the Session 2019-2020

The necessary information for the admission is given below

1. Name in full - Rayashri suresh wadhe
(In Block Letters) Surname Name Middle Name
2. Mother Name Pramila suresh wadhe
3. Father Name suresh Ramdas wadhe
4. Date of Birth 13-12-1995
5. Caste : SC/ST/NT/SBC/OBC/OPEN SC
6. Medium : Marathi / English marathi
7. Present class M.S.W II year
8. Permanent Address Tapat Kathore BK Bhusawal
(With Phone / Cell No.) 9021276361

Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - ^{MSW} MSW II year |
|------------|-----------------|------------------|-----------|---|
| 114 | 18/11/19 | 200 | | Roll No. 80 Reg. No. Year 2019-20 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in Human Resource management for the Session 2019-2020

The necessary information for the admission is given below

- 1 Name in full - Wagh Sawita Prakash
(In Block Letters) Surname Name Middle Name
2. Mother Name Wagh Sri kamal Prakash
3. Father Name Wagh Prakash Ninu
4. Date of Birth 27/11/1997
5. Caste : SC/ST/NT/SBC/OBC/OPEN NT-C
6. Medium : Marathi / English Marathi
7. Present class MSW-II year
8. Permanent Address At Po. khemkheda Tal. muktainagar. Dist. jalgaon
(With Phone / Cell No.) 9604189343
9552459827 - Brother

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - HRM |
|------------|-----------------|------------------|-----------|--------------------------------------|
| C10/305 | 21/9/2019 | ₹. 200/- | | Roll No. Reg. No. Year 2019-20 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in Human Resource management for the Session 2019-2020

The necessary information for the admission is given below

1 Name in full - CHAVAN SANDIP APPA
(In Block Letters) Surname Name Middle Name

2. Mother Name SANGITA

3. Father Name APPA

4. Date of Birth 20/06/1997

5. Caste : SC/ST/NT/SBC/OBC/OPEN NT (A)

6. Medium : Marathi / English MARATHI

7. Present class AT POST, MALKHEDA TAL-JAMNER DIST-JALGAON

8. Permanent Address AT POST- MALKHEDA TAL-TAMNER DIST-JALGAON

(With Phone / Cell No.) 7798393423

Signature of the Applicant

Annexure-A

List of admitted students for Career Oriented Courses under Ordinance 181

1) Name of the College

- Dhanaji Nana Chaudhari Vidya Prabodhini's
Loksevak Madhukarrao Chaudhari College of Social Work, Jalgaon

2) Name of Career oriented Course

- Certificate Course in Human Resource Management

3) Academic Year

- 2019 - 2020

4) Intake Capacity

- 60

| Sr. No. | Full name of the Students | Gender | Category * | Educational Qualification # | Year of passing- Cert./Diploma Course (Applicable only for Diploma & Adv. Diploma Course) | Presently admitted Class (F.Y.,S.Y., T.Y./P.G. | Remark (If Any) |
|---------|----------------------------|--------|------------|-----------------------------|---|---|------------------|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| 1 | DHANGAR NIKHIL HIRALAL | MALE | NT-C | XII | | | |
| 2 | GAIKWAD RUSHIKESH VIJAY | MALE | SC | XII | | | |
| 3 | JADHAV TEJASWITA MUKUND | FEMALE | OBC | XII | | | |
| 4 | JAWALE MANASI PRAVIN | FEMALE | OBC | XII | | | |
| 5 | NIKAM PALLAVI GIRDHAR | FEMALE | SC | XII | | | |
| 6 | SONAWANE VAISHALI NANABHAU | FEMALE | SC | XII | | | |
| 7 | WANI RUSHIKESH SATISH | MALE | OBC | XII | | | |

CERIFICATE

This is to

certify that the documents regarding educational qualifications of the above students have been verified and found correct. The students mentioned in the list are eligible for the admission to the above mentioned course as per university ordinance-

181.

Co-ordinator

Mobile No. -



LOKSEVAK MADHUKARRAO
CHAUDHARI COLLEGE OF
SOCIAL WORK, JALGAON

Application for
Admission to
CCHRM
Session 2020-2021
Application No. :
2892984



Applicant's Personal Details

| Name of the Student | Surname | First name | Father name | Mother's Name |
|---------------------|---------|------------|-------------|---------------|
| | DHANGAR | NIKHIL | HIRALAL | URMILA |

| | | | |
|---|-------------|--------------------------------------|--------------|
| Student Name(HINDI) | | | |
| Date of Birth | 19/05/2000 | Place Of Birth | NANURBAR |
| Birth State | MAHARASHTRA | Birth District | NANDURBAR |
| Birth Tehsil | nandurbar | Voter Id | |
| Marital Status | UNMARRIED | Blood Group | AB+ |
| Religion | HINDU | Gender | MALE |
| Nationality | INDIAN | Aadhaar card Number | 520043633915 |
| Mother Tongue | MARATHI | Passport Number | |
| EID Number | | Employment Status | Unemployed |
| NCC/NSS | NO | Eligibility No. | |
| Caste Category | NT-C | Sub Caste | DHANGAR |
| Enrollment Number | | PRN Number | |
| Handicap | | Is Orphan | NO |
| Saral No. | | Udise No. | |
| Student has a Desktop/ Laptop/ Smart phone | NO | Student has internet connectivity | NO |
| Municipal Ward | | | |

| | | | |
|-------------------------|---------|---------------------|------------|
| Father's/Husband's Name | HIRALAL | | |
| Occupation | | Gross Annual Income | 280,000.00 |
| Mobile | | | |
| Office Address | | | |

Current Exam Details

| | | | |
|---------|--|-------------|--|
| Section | | Roll Number | |
| Subject | | | |

Address of Correspondence

| | | | |
|---------|--------------------------|-------------------|-----------|
| Address | plot no 23 sharada nagar | | |
| State | MAHARASHTRA | District | NANDURBAR |
| Tehsil | NANDURBAR | City/Town/Village | NANDURBAR |
| Pincode | 425412 | | |



LOKSEVAK MADHUKARRAO
CHAUDHARI COLLEGE OF
SOCIAL WORK, JALGAON

Application for
Admission to
CCHRM
Session 2020-2021
Application No. :
2908936



Rushikesh

Applicant's Personal Details

| Name of the Student | Surname | First name | Father name | Mother's Name |
|---------------------|---------|------------|-------------|---------------|
| | GAIKWAD | RUSHIKESH | VIJAY | SHOBHA |

| | | | |
|---|---------------|--------------------------------------|---------------|
| Student Name(HINDI) | | | |
| Date of Birth | 28/03/1999 | Place Of Birth | JALGAON |
| Birth State | Please Select | Birth District | Please Select |
| Birth Tehsil | JALGAON | Voter Id | |
| Marital Status | UNMARRIED | Blood Group | B+ |
| Religion | HINDU | Gender | MALE |
| Nationality | INDIAN | Aadhaar card Number | 697457953438 |
| Mother Tongue | MARATHI | Passport Number | |
| EID Number | | Employment Status | Unemployed |
| NCC/NSS | NO | Eligibility No. | |
| Caste Category | SC | Sub Caste | MAHAR-37 |
| Enrollment Number | | PRN Number | |
| Handicap | | Is Orphan | NO |
| Saral No. | | Udise No. | |
| Student has a Desktop/ Laptop/ Smart phone | NO | Student has internet connectivity | NO |
| Municipal Ward | | | |

| | | | |
|-------------------------|-------|---------------------|------------|
| Father's/Husband's Name | VIJAY | Gross Annual Income | 132,000.00 |
| Occupation | | | |
| Mobile | | | |
| Office Address | | | |

| Current Exam Details | | Roll Number |
|----------------------|--|-------------|
| Section | | |
| Subject | | |

| Address of Correspondence | | | |
|---------------------------|-----------------------------|-------------------|---------|
| Address | Masjid Pariser Samata Nagar | | |
| State | MAHARASHTRA | District | JALGAON |
| Tehsil | JALGAON | City/Town/Village | JALGAON |
| Pincode | 425001 | | |



LOKSEVAK MADHUKARRAO
CHAUDHARI COLLEGE OF
SOCIAL WORK, JALGAON

Application for
Admission to
CCHRM
Session 2020-2021
Application No. :
2909838



Applicant's Personal Details

| Name of the Student | Surname | First name | Father name | Mother's Name |
|---------------------|---------|------------|-------------|---------------|
| | JADHAV | TEJASWITA | MUKUND | NAINA |

| | | | |
|---|-------------|--------------------------------------|------------------|
| Student Name(HINDI) | | | |
| Date of Birth | 12/08/1997 | Place Of Birth | JALGAON |
| Birth State | MAHARASHTRA | Birth District | Please Select |
| Birth Tehsil | Jalgaon | Voter Id | |
| Marital Status | UNMARRIED | Blood Group | O+ |
| Religion | HINDU | Gender | FEMALE |
| Nationality | INDIAN | Aadhaar card Number | 914622605617 |
| Mother Tongue | MARATHI | Passport Number | |
| EID Number | | Employment Status | Unemployed |
| NCC/NSS | NO | Eligibility No. | |
| Caste Category | OBC | Sub Caste | KUNBI |
| Enrollment Number | | PRN Number | 2015015400276144 |
| Handicap | | Is Orphan | NO |
| Saral No. | | Udise No. | |
| Student has a Desktop/ Laptop/ Smart phone | NO | Student has internet connectivity | NO |
| Municipal Ward | | | |

| | | | |
|-------------------------|--------|---------------------|-----------|
| Father's/Husband's Name | MUKUND | Gross Annual Income | 62,000.00 |
| Occupation | FARMER | | |
| Mobile | | | |
| Office Address | | | |

| Current Exam Details | | Roll Number |
|----------------------|--|-------------|
| Section | | |
| Subject | | |

| Address of Correspondence | | | |
|---------------------------|---|-------------------|---------|
| Address | at Nandgaon post Nandra(bk)Te& dist Jalgaon | | |
| State | MAHARASHTRA | District | JALGAON |
| Tehsil | JALGAON | City/Town/Village | JALGAON |
| Pincode | 425002 | | |



LOKSEVAK MADHUKARRAO
CHAUDHARI COLLEGE OF
SOCIAL WORK, JALGAON

Application for
Admission to
CCHRM
Session 2020-2021
Application No. :
2907842



Applicant's Personal Details

| | | | | |
|---------------------|-------------------|----------------------|-----------------------|-------------------------|
| Name of the Student | Surname JAWALE | First name MANASI | Father name PRAVIN | Mother's Name DIPALI |
|---------------------|-------------------|----------------------|-----------------------|-------------------------|

| | | | | |
|---|-------------|--------------------------------------|------------------|--|
| Student Name(HINDI) | MARATHI | | | |
| Date of Birth | 18/03/2000 | Place Of Birth | SAVADA | |
| Birth State | MAHARASHTRA | Birth District | JALGAON | |
| Birth Tehsil | Yawal | Voter Id | B+ | |
| Marital Status | UNMARRIED | Blood Group | FEMALE | |
| Religion | HINDU | Gender | FEMALE | |
| Nationality | INDIAN | Aadhaar card Number | 896335347205 | |
| Mother Tongue | MARATHI | Passport Number | | |
| EID Number | | Employment Status | Unemployed | |
| NCC/NSS | YES | Eligibility No. | | |
| Caste Category | OBC | Sub Caste | LEWA PATIDAR | |
| Enrollment Number | | PRN Number | 2017015400005415 | |
| Handicap | | Is Orphan | NO | |
| Saral No. | | Udise No. | | |
| Student has a Desktop/ Laptop/ Smart phone | NO | Student has internet connectivity | NO | |
| Municipal Ward | | | | |

| | | | |
|-------------------------|-----------------------|---------------------|-----------|
| Father's/Husband's Name | PRAVIN BHASKAR JAWALE | Gross Annual Income | 40,000.00 |
| Occupation | | | |
| Mobile | | | |
| Office Address | | | |
| Current Exam Details | Roll Number | | |
| Section | | | |
| Subject | | | |

| | | | |
|---------------------------|-------------|-------------------|---------|
| Address of Correspondence | | | |
| AT POST DO, KATHORA | | | |
| Address | MAHARASHTRA | District | JALGAON |
| State | YAWAL | City/Town/Village | YAWAL |
| Tehsil | 425301 | | |
| Pincode | | | |

Session 2020-2021



LOREEVAR MAHAVEERRAO
CHAUDHARI COLLEGE OF
SOCIAL WORK, JALGAON

Application for
Admission to
C.S.W.B
Session 2020-2021
Application No. 1
2892791



Applicant's Personal Details

| Name of the Student | Surname | First name | Father name | Mother's Name |
|---------------------|---------|------------|-------------|---------------|
| | MEVA | PAVJI | CHINJI | SHRUTI |

| | | | |
|--|--------------|-----------------------------------|-------------|
| Student Name(HINDI) | मेवा पावजी | Place of Birth | जालगा |
| Date of Birth | 19/03/1975 | Birth District | जालगा |
| Birth State | MAHARASHTRA | voter ID | 02 |
| Birth Detail | MALE | Blood Group | B |
| Religious Status | UNREGISTERED | Gender | MALE |
| Religion | HINDI | Aadhar Card Number | 56265500110 |
| Nationality | INDIAN | Passport Number | |
| Mother's Language | MAVATHI | Employment Status | Unemployed |
| EID Number | NO | Eligibility No. | NA |
| HCC/MS | SC | Sub Caste | NA |
| Caste Category | SC | PRN Number | NO |
| Enrollment Number | | Is Orphan | NO |
| Handicap | | Udlse No. | |
| Serial No. | | Student has Internet connectivity | NO |
| Student has a Desktop/ Laptop/ Smart phone | NO | | |
| Municipal Ward | | | |

| | | | |
|-------------------------|--------------------|---------------------|-----------|
| Father's/Husband's Name | NIKAM GIRDHAR VEDU | Gross Annual Income | 50,000.00 |
| Occupation | RETIRED | | |
| Is Able | | | |

| | | | |
|----------------------|--|-------------|--|
| Office Address | | Roll Number | |
| Current Exam Details | | | |
| Section | | | |
| Subject | | | |

| | | | |
|---------------------------|---------------------------------|-------------------|---------|
| Address of Correspondence | PLOT NO 61 GAT NO 2 KOLHE NAGAR | | |
| Address | | District | JALGAON |
| State | MAHARASHTRA | City/Town/Village | JALGAON |
| Tehsil | JALGAON | | |
| Pincode | 425001 | | |



LOKSEVAK MADHUKARRAO
CHAUDHARI COLLEGE OF
SOCIAL WORK, JALGAON

Application for
Admission to
CCHRM
Session 2020-2021
Application No. :
2896537



Applicant's Personal Details

| Name of the Student | Surname | First name | Father name | Mother's Name |
|---------------------|----------|------------|-------------|---------------|
| | SONAWANE | VAISHALI | NANABHAU | KAMAL |

| | | | |
|---|-----------------------|--------------------------------------|--------------|
| Student Name(HINDI) | वैशाली नानाभाऊ सोनवणे | | |
| Date of Birth | 04/06/1987 | Place Of Birth | AMALNER |
| Birth State | MAHARASHTRA | Birth District | JALGAON |
| Birth Tehsil | AMALNER | Voter Id | |
| Marital Status | MARRIED | Blood Group | O+ |
| Religion | HINDU | Gender | FEMALE |
| Nationality | INDIAN | Aadhaar card Number | 218385471242 |
| Mother Tongue | MARATHI | Passport Number | |
| EID Number | | Employment Status | Unemployed |
| NCC/NSS | NO | Eligibility No. | |
| Caste Category | SC | Sub Caste | MAHAR |
| Enrollment Number | | PRN Number | |
| Handicap | | Is Orphan | NO |
| Saral No. | | Udise No. | |
| Student has a Desktop/ Laptop/ Smart phone | NO | Student has internet connectivity | NO |
| Municipal Ward | | | |

| | | | |
|-------------------------|----------------------|---------------------|-----------|
| Father's/Husband's Name | SONAWANE NANA NATTHU | Gross Annual Income | 70,000.00 |
| Occupation | RETIRED | | |
| Mobile | | | |
| Office Address | | | |

| Current Exam Details | |
|----------------------|-------------|
| Section | Roll Number |
| Subject | |

| Address of Correspondence | | | |
|---------------------------|---------------------------|-------------------|---------|
| Address | NEAR LATHI SCHOOL JALGAON | | |
| State | MAHARASHTRA | District | JALGAON |
| Tehsil | JALGAON | City/Town/Village | JALGAON |
| Pincode | 425001 | | |



LOKSEVAK MADHUKARRAO
CHAUDHARI COLLEGE OF
SOCIAL WORK, JALGAON

Application for
Admission to
CCHRM
Session 2020-2021
Application No. :
2879015



Applicant's Personal Details

| Name of the Student | Surname | First name | Father name | Mother's Name |
|---------------------|---------|------------|-------------|---------------|
| | WANI | RUSHIKESH | SATISH | AASHA |

| | | | |
|---|-----------------------|--------------------------------------|--------------|
| Student Name(HINDI) | Rushikesh Satish Wani | | |
| Date of Birth | 11/09/1999 | Place Of Birth | ASODA |
| Birth State | MAHARASHTRA | Birth District | JALGAON |
| Birth Tehsil | Jalgaon | Voter Id | |
| Marital Status | UNMARRIED | Blood Group | B+ |
| Religion | HINDU | Gender | MALE |
| Nationality | INDIAN | Aadhaar card Number | 539459623854 |
| Mother Tongue | MARATHI | Passport Number | |
| EID Number | | Employment Status | Unemployed |
| NCC/NSS | NO | Eligibility No. | |
| Caste Category | OBC | Sub Caste | WANI |
| Enrollment Number | | PRN Number | |
| Handicap | NO | Is Orphan | NO |
| Saral No. | | Udise No. | |
| Student has a Desktop/ Laptop/ Smart phone | NO | Student has internet connectivity | NO |
| Municipal Ward | | | |

| | | | |
|-------------------------|--------|---------------------|-----------|
| Father's/Husband's Name | SATISH | | |
| Occupation | LABOUR | Gross Annual Income | 50,000.00 |
| Mobile | | | |
| Office Address | | | |

| Current Exam Details | | | |
|----------------------|--|-------------|--|
| Section | | Roll Number | |
| Subject | | | |

| Address of Correspondence | | | |
|---------------------------|-----------------------------------|-------------------|---------|
| Address | At. Post asoda tal. Dist. Jalgaon | | |
| State | MAHARASHTRA | District | JALGAON |
| Tehsil | JALGAON | City/Town/Village | JALGAON |
| Pincode | 425101 | | |

Annexure-A

List of admitted students for Career Oriented Courses under Ordinance 181

- 1) Name of the College
- 2) Name of Career oriented Course
- 3) Academic Year
- 4) Intake Capacity

- Dhanaji Nana Chaudhari Vidya Prabodhini's Loksevak Madhukarrao Chaudhari College of Social Work, Jalgaon
- Certificate Course in Human Resource Management
- 2021 - 2022
- 60

| No. | Full name of the Students | Gender | Category | Educational Qualification | Year of passing. Cert./Diploma Course (Applicable only for Diploma & Adv. Diploma Course) | Presently admitted Class (F.Y.,S.Y., T.Y./P.G. | Remark (If Any) |
|-----|---------------------------|--------|----------|---------------------------|---|---|------------------|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| 1 | ANIRE PUJA RAVINDRA | FEMALE | SC | | | MSWSY | |
| 2 | KUSHI JAYESH KALPANARAJU | MALE | SBC | | | MSWSY | |
| 3 | KSHIRSAGAR PANKAJ ASHOK | MALE | OBC | | | MSWSY | |
| 4 | KUMAVAT NAYANA ANIL | FEMALE | NT-B | | | MSWSY | |
| 5 | MAHAJAN BHUSHAN DEVENDRA | MALE | OBC | | | MSWSY | |
| 6 | PATIL MANOJI KHANDU | MALE | OBC | | | MSWSY | |
| 7 | RAMHOD SHIRIRAM BHIMSING | MALE | VI | | | MSWSY | |
| 8 | SONAWANE SHUBHANGI SUDESH | MALE | SC | | | MSWSY | |
| 9 | TAYADE SANDESH EKNATH | MALE | SBC | | | MSWSY | |
| 10 | TRIBHUVAN PIYUSH RAHUL | MALE | SC | | | BSWFY | |

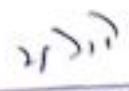
CERTIFICATE This is to certify that the documents regarding educational qualifications of the above students have been verified and found correct. The students mentioned in the list are eligible for the admission to the above mentioned course as per university ordinance-

181.



Co-ordinator
Mobile No. - 9545769586




ACTING PRINCIPAL
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon

Annexure-A

List of admitted students for Career Oriented Courses under Ordinance 181

- 1) Name of the College
 - Dhanaji Nana Chaudhari Vidya Prabodhini's Loksevak Madhukarrao Chaudhari College of Social Work , Jalgaon
- 2) Name of Career oriented Course
 - Certificate Course in Human Resource Management
- 3) Acedamic Year
 - 2021 – 2022
- 4) Intake Capacity
 - 60

| Sr. No. | Full name of the Students | Gender | Category | Educational Qulification # | Year of passing. Cert./Diploma Course (Applicable only for Diploma & Adv. Diploma Course) | Presently admitted Class (F.Y.,S.Y., T.Y./P.G. | Remark (If Any) |
|---------|---------------------------|--------|----------|----------------------------|---|---|------------------|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| 1 | AHIRE PUJA RAVINDRA | FEMALE | SC | | | MSWSY | |
| 2 | KOSHTI JAYESH KALPANARAJU | MALE | SBC | | | MSWSY | |
| 3 | KSHIRSAGAR PANKAJ ASHOK | MALE | OBC | | | MSWSY | |
| 4 | MAHAJAN BHUSHAN DEVENDRA | MALE | OBC | | | MSWSY | |
| 5 | PATIL MANOJ KHANDU | MALE | OBC | | | MSWSY | |
| 6 | RATHOD SHRIRAM BHIMSING | MALE | VJ | | | MSWSY | |
| 7 | SONAWANE SHUBHANGI SUDESH | MALE | SC | | | MSWSY | |
| 8 | TAYADE SANDESH EKNATH | MALE | SBC | | | MSWSY | |
| 9 | TRIBHUVAN PIYUSH RAHUL | MALE | SC | | | BSWFY | |

CERIFICATE This is to
 certify that the documents regarding educational qualifications of the above students have been verified and found correct.
 The students mentioned in the list are eligible for the admission to the above mentioned course as per university ordinance-



Co-ordinator

Mobile No. **9545769586**



4717

ACTING PRINCIPAL
 Loksevak Madhukarrao Chaudhari
 College of Social Work, Jalgaon



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - HRM |
|------------|-----------------|------------------|-----------|--------------------------------------|
| 610-195 | 18/11/21 | 1200/- | | Roll No. Reg. No. Year 2021-22 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in ~~HRM~~ Human

~~Resource management~~ for the Session 2021-2022

The necessary information for the admission is given below

- 1 Name in full - AHIRE PUJA RAVINDRA
(In Block Letters) Surname Name Middle Name
2. Mother Name MANGLA
3. Father Name RAVINDRA
4. Date of Birth 14/06/1999
5. Caste : SC/ST/NT/SBC/OBC/OPEN SC
6. Medium : Marathi / English MARATHI
7. Present class MSH - IInd.
8. Permanent Address At: Ambedkar nagar, Jalgaon
- (With Phone / Cell No.) 901184974

Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - HRM |
|------------|-----------------|------------------|-----------|--------------------------------------|
| 210/193 | 18/11/2021 | RS. 500/- | | Roll No. Reg. No. Year 2021-22 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in HUMAN RESOURCE MAN-
AGEMENT for the Session 201 -201

The necessary information for the admission is given below

1 Name in full - KOSHTI JAYESH KALPANARAJU
(In Block Letters) Surname Name Middle Name

2. Mother Name KALPANA

3. Father Name RAJU

4. Date of Birth 05/06/1996

5. Caste : SC/ST/NT/SBC/OBC/OPEN SBC

6. Medium : Marathi / English MARATHI

7. Present class MSW - IInd

8. Permanent Address Plot No. 4 Gate No. 99 Virshavarkar nagar
Jalgaon

(With Phone / Cell No.) 8983808881

Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - CCHRM |
|------------|-----------------|------------------|-----------|--------------------------------------|
| 205 | 26/11/22 | 0600/- | | Roll No. Reg. No. Year 2021-22 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in CERTIFICATE COURSE IN HUMAN RESOURCE MANAGEMENT for the Session 2021-2022

The necessary information for the admission is given below

1. Name in full - KSHIRSAGAR PANKAJ ASHOK
(In Block Letters) Surname Name Middle Name
2. Mother Name KSHIRSAGAR DAGUBAI ASHOK
3. Father Name KSHIRSAGAR ASHOK KESHAV
4. Date of Birth 22/03/2000
5. Caste : SC/ST/NT/SBC/OBC/OPEN O.B.C
6. Medium : Marathi / English MARATHI
7. Present class M.S.W - II
8. Permanent Address AT PIMPALGAON (HARE) TEL PACHORA DIST JALGAON
(With Phone / Cell No.) 9860917415

Email Id: kshirsagarpankaj2@gmail.com Signature of the Applicant Pankaj



Application Form

or the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - ^{HRM - Management} MSW - IInd |
|------------|-----------------|------------------|-----------|--|
| Online | 15-12-2021 | 1200 | | Roll No. 42 Reg. No. Year - 2021-22 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in Human Resource

management for the Session 201 -201

The necessary information for the admission is given below

1 Name in full - KUMAVAT NAYANA ANIL
(In Block Letters) Surname Name Middle Name

2. Mother Name KUMAVAT SUREKHA ANIL

3. Father Name KUMAVAT NAYANA ANIL

4. Date of Birth 09/03/1999

5. Caste : SC/ST/NT/SBC/OBC/OPEN NT (B)

6. Medium : Marathi / English MARATHI

7. Present class MSW - IInd

8. Permanent Address AT-POST- MEHUNBARE TAL-40GAON, DIST- JALGAON

(With Phone / Cell No.) 9167836348 / 8308088001

Kumavat
Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| | | | | |
|------------|-----------------|------------------|-----------|--------------|
| Receipt No | Date of Payment | Amount Deposited | Signature | Class - HRM |
| C10400 | 23/11/2021 | RS.600/- | | Roll No. |
| | | | | Reg. No. |
| | | | | Year 2021-22 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
 The Principal
 Loksevak Madhukarrao Chaudhari
 College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in Human Resource

Management for the Session 2021-2022

The necessary information for the admission is given below

- 1 Name in full - MAHATAN BHUSHAN DEVENDRA.
(In Block Letters) Surname Name Middle Name
2. Mother Name Sunita Devendra Mali
3. Father Name Devendra Dhrama Mali
4. Date of Birth 04/03/1998
5. Caste : SC/ST/NT/SBC/OBC/OPEN OBC
6. Medium : Marathi / English Marathi
7. Present class _____
8. Permanent Address At / post. Wade, Tal. Bhadgaon (Jalgaon)
(With Phone / Cell No.) 9657918834

B. Mali
 Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - HRM |
|------------|-----------------|------------------|-----------|--------------------------------------|
| 906 | 26/11/21 | 0602 | | Roll No. Reg. No. Year 2021-22 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in CERTIFICATE COURSE IN HUMAN RESOURCE MANAGEMENT
for the Session 2021-2022

The necessary information for the admission is given below

1 Name in full - PATIL MANOJ KHANDU
(In Block Letters) Surname Name Middle Name

2. Mother Name PATIL SUNANDA KHANDU

3. Father Name PATIL KHANDU SUPADU

4. Date of Birth 07/06/1998

5. Caste : SC/ST/NT/SBC/OBC/OPEN O.B.C.

6. Medium : Marathi / English MARATHI

7. Present class M.S.W-II

8. Permanent Address AT SAVKHEDA BK TEL PACHORA DIST JALGAON
(With Phone / Cell No.) 9420595938

Signature of the Applicant

Email id: MANOJPATILMK@gmail.com



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - HRM |
|------------|-----------------|------------------|-----------|--------------------------------------|
| Online | 23-11-21 | 500 | | Roll No. Reg. No. Year 2021-22 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in Human Resource

Management for the Session 2021-2022

The necessary information for the admission is given below

- 1 Name in full - RATHOD SHRIRAM BHIMSING
(In Block Letters) Surname Name Middle Name
2. Mother Name Shobha Shiram
3. Father Name Bhimsing Sagat Rathod
4. Date of Birth 30/12/1997
5. Caste : SC/ST/NT/SBC/OBC/OPEN NT
6. Medium : Marathi / English Marathi English
7. Present class _____
8. Permanent Address At/post, Talegon Tanda, Telchalisagon
(With Phone / Cell No.) Dist. Jalgaon (8459104071)

Signature of the Applicant

S Rathod



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| | | | | |
|---------------|-------------------|------------------|-----------|--------------------|
| Receipt No | Date of Payment | Amount Deposited | Signature | Class - <u>HRM</u> |
| <u>online</u> | <u>23-11-2021</u> | <u>1200</u> | | Roll No. |
| | | | | Reg. No. |
| | | | | Year <u>21-22</u> |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk _____ Co-ordinate _____ Principal _____

To,
 The Principal
 Loksevak Madhukarrao Chaudhari
 College of Social Work, Jalgaon



Respected Sir,
 I requested for the admission to Certificate Course in Human Resource Management for the Session 2021-2022

The necessary information for the admission is given below

- 1 Name in full - SONAWANE SHUBHANGI SUDESH.
(In Block Letters) Surname Name Middle Name
2. Mother Name Jyoti
3. Father Name Sudesh Ratan Sonawane.
4. Date of Birth 10/05/1999
5. Caste : SC ST NT SBC OBC OPEN SC
6. Medium : Marathi / English Marathi
7. Present class _____
8. Permanent Address At/post / Jalgaon, Tal. Jalgaon.
(With Phone / Cell No. Dist. Jalgaon. (7875065111))

shubhangisonawane372@gmail.com

Signature of the Applicant

Application Form

Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| | | | | |
|---|-----------------|------------------|-----------|--------------|
| Receipt No | Date of Payment | Amount Deposited | Signature | Class - HRM |
| Online | 23-11-21 | 1200 | | Roll No. |
| Remarks of the Selection Committee The candidate named above is /is not recommended for admission | | | | Reg. No. |
| Admission Clerk | | | | Year 2021-22 |

Co-ordinate _____
 Princi _____

To,
 The Principal
 Loksevak Madhukarrao Chaudhari
 College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in Human

Resource Management for the Session 2021-2022

The necessary information for the admission is given below

- 1 Name in full - TAYAJE SANDESH EKNATH
 (In Block Letters) Surname Name Middle Name
- 2. Mother Name Chaya
- 3. Father Name Eknath Dayaram Tayade
- 4. Date of Birth 02/09/1995
- 5. Caste : SC/ST/NT/SBC/OBC/OPEN SBC
- 6. Medium : Marathi / English Marathi
- 7. Present class _____
- 8. Permanent Address At/post. 609 Jalgaon. Tel. Jalgaon.
 (With Phone / Cell No.) Dist. Jalgaon. (9276552013)

Sandesh
 Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - BSW I |
|------------|-----------------|------------------|-----------|-------------------------------------|
| | 18-11-2021 | ₹1200/- | | Roll No. Reg. No. Year - 2021 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Princ



To,
 The Principal
 Loksevak Madhukarrao Chaudhari
 College of Social Work, Jalgaon

Respected Sir,

I requested for the admission to Certificate Course in Human Resource management for the Session 201 -201

The necessary information for the admission is given below

- 1 Name in full - Tribhuvan PiYush Rahul.
 (In Block Letters) Surname Name Middle Name
2. Mother Name Vaishali Rahul tribhuvan.
3. Father Name Rahul Dadabhau tribhuvan.
4. Date of Birth 12 / 11 / 2003 .
5. Caste : SC/ST/NT/SBC/OBC/OPEN SC
6. Medium : Marathi / English English.
7. Present class BSW I
8. Permanent Address Old malegaon road, chalisgaon.
 (With Phone / Cell No.) 9423188685 .

Tribhuvan
 Signature of the Applicant

Annexure-A

List of admitted students for Career Oriented Courses under Ordinance 181

- 1) Name of the College - Dhanaji Nana Chaudhari Vidya Prabodhini's Loksevak Madhukarrao Chaudhari College of Social Work , Jalgaon
- 2) Name of Career oriented Course - Certificate Course in Human Resource Management
- 3) Acedamic Year - 2022 - 2023
- 4) Intake Capacity - 60


| Sr. No. | Full name of the Students | Gender | Category | Educational Qulification # | Year of passing. Cert/Diploma Course (Applicable only for Diploma & Adv. Diploma Course) | Presently admitted Class (F.Y.,S.Y., T.Y./P.G. | Remark (If Any) |
|---------|------------------------------|--------|----------|----------------------------|--|---|------------------|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| 1 | GARGE SWAPNALI RAMANLAL | FEMALE | OPEN | XII | | MASY | |
| 2 | KATE PRATIK JITENDRA | MALE | NT-C | XII | | MSWSY | |
| 3 | NIMBALKAR UMESH RAVINDRA | MALE | SC | XII | | MSWFY | |
| 4 | PAWAR PRASAD BALASAHEB | MALE | OBC | XII | | MSWFY | |
| 5 | RAVERKAR HRISHIKESH VISHVESH | MALE | OPEN | XII | | LLB-III | |

CERIFICATE

This is to certify that the documents regarding educational qualifications of the above students have been verified and found correct. The students mentioned in the list are eligible for the admission to the above mentioned course as per university ordinance-181.

Co-ordinator
Mobile No. -




Dr. RAKESH P. CHAUDHARI
PRINCIPAL
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Dhanaji Nana Chaudhari Vidya Prabodhini Sanchalit
**LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK,
JALGAON**

Student Admission Report

From Date 01/06/2022 To 21/11/2022

Session : 2022-2023

Course : CCHRM

| Sr. No. | Roll No | Student Id | STUDENT NAME |
|---------|---------|------------|------------------------------|
| CCHRM | | | |
| 1 | | 4293609 | GARGE SWAPANALI RAMANLAL |
| 2 | | 4282690 | KATE PRATIK JITENDRA |
| 3 | | 4294080 | NIMBALKAR UMESH RAVINDRA |
| 4 | | 4283328 | PAWAR PRASAD BALASAHEB |
| 5 | | 4259979 | RAVERKAR HRISHIKESH VISHVESH |



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Roll No. Reg. No. Year |
|------------|-----------------|------------------|-----------|---|
| 09/02/115 | 19/11/22 | RS 1200/- | | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in Human Resource

management for the Session 2022-2023

The necessary information for the admission is given below

1 Name in full - Garge Swapanali Ramanlal
(In Block Letters) Surname Name Middle Name

2. Mother Name Ranjana

3. Father Name Ramanlal

4. Date of Birth _____

5. Caste : SC/ST/NT/SBC/OBC/OPEN Open

6. Medium : Marathi / English English

7. Present class M.A Yoga II

8. Permanent Address Near Govat Bazar, Yawale

(With Phone / Cell No.) 9867351119 9552023578

Signature of the Applicant




Application Form

For the Admission of Certificate Course in

- ✓ 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - <u>HRM</u> |
|------------|-----------------|------------------|---|---|
| <u>276</u> | <u>14/11/22</u> | <u>600/-</u> |  | Roll No. Reg. No. Year <u>2022-23</u> |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk _____ Co-ordinate _____ Principal _____

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,
I requested for the admission to Certificate Course in Human Resource
management for the Session 2022 - 2025

The necessary information for the admission is given below

- 1. Name in full - Kate Pratik Jitendra
(In Block Letters) Surname Name Middle Name
- 2. Mother Name Kate Sunita Jitendra
- 3. Father Name Kate Jitendra Nathu
- 4. Date of Birth 12/02/2000
- 5. Caste : SC/ST/NT/SBC/OBC/OPEN NT-C
- 6. Medium : Marathi / English Marathi
- 7. Present class M.S.W IInd
- 8. Permanent Address At. post. sunasgaon Tal. Dhusawal Dist. Jalgaon
(With Phone / Cell No.) 8180928600

Signature of the Applicant





Application Form

For the Admission of **Certificate Course in**

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Roll No. Reg. No. Year |
|------------|-----------------|------------------|-----------|---|
| C10/SC/285 | 21/11/2022 | Rs. 1200/- | | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to **Certificate Course in** Human Resource Management

for the Session 20 - 20

The necessary information for the admission is given below

1 Name in full - NIMBALKAR UMESH RAVINDRA
(In Block Letters) Surname Name Middle Name

2. Mother Name UTAWALA

3. Father Name NIMBALKAR RAVINDRA GAMBHIR

4. Date of Birth 27/10/1996

5. Caste : SC/ST/NT/SBC/OBC/OPEN SC

6. Medium : Marathi / English _____

7. Present class _____

8. Permanent Address Seni Nagar Pimprala, Jalgaon

(With Phone / Cell No.) 9673881482

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - ^{CCMAM} HF |
|------------|-----------------|------------------|-----------|--|
| 100 | 15/11/22 | 1200 | | Roll No. Reg. No. Year 22-23 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in Human Resource Management
for the Session 2022-23

The necessary information for the admission is given below

- 1 Name in full - PAWAR PRASAD BALASAHEB
(In Block Letters) Surname Name Middle Name
2. Mother Name Ratnabai
3. Father Name Balasaheb Shivajirao Pawar
4. Date of Birth 06/11/1997
5. Caste : SC/ST/NT/SBC/OBC/OPEN OBC
6. Medium : Marathi / English English
7. Present class MSW-I
8. Permanent Address AT. Po. Kusumbe, BK. Tal. Raver
(With Phone / Cell No.) 8805341521

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - HRM |
|------------|-----------------|------------------|-----------|--------------------------------------|
| | 21-10-2022 | 1200/- Online | | Roll No. Reg. No. Year 2022-23 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission.

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in

HRM

for the Session 2022-23

The necessary information for the admission is given below

- 1 Name in full - RAVERKAR HRISHIKESH VISHVESM
(In Block Letters) Surname Name Middle Name
2. Mother Name SHILPA
3. Father Name VISHVESH
4. Date of Birth 27th April 2003
5. Caste : SC/ST/NT/SBC/OBC/OPEN open Hindu waru
6. Medium : Marathi / English English
7. Present class B.A LL.B III Year
8. Permanent Address Spandan Ganpati Nagar Jalgaon
(With Phone / Cell No.) 95185 28101 , 9552023578

HRISHIKESH

Signature of the Applicant

Annexure-A

List of admitted students for Career Oriented Courses under Ordinance 181

- | | |
|-----------------------------------|--|
| 1) Name of the College | - Dhanaji Nana Chaudhari Vidya Prabodhini's Loksevak Madhukarrao Chaudhari College of Social Work , Jalgaon |
| 2) Name of Career oriented Course | - Certificate Course in N.G.O. Management |
| 3) Acedamic Year | - 2018- 2019 |
| 4) Intake Capacity | - 60 |

| Sr. No. | Full name of the Students | Gender | Category * | Educational Qulification # | Year of passing. Cert./Diploma Course (Applicable only for Diploma & Adv. Diploma Course) | Presently admitted Class (F.Y.,S.Y.,T. Y./P.G. | Remark (If Any) |
|---------|-----------------------------|--------|------------|----------------------------|---|---|------------------|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| 1 | BADGUJAR ANKIT SUNIL | MALE | OBC | XII | | | |
| 2 | BADHE DEVENDRA SUDHAKAR | MALE | OBC | XII | | | |
| 3 | BHARSAT SACHIN GIRIDHAR | MALE | ST | XII | | | |
| 4 | CHAUDHARI LAKSHAMAN LONDHU | MALE | ST | XII | | | |
| 5 | CHAVHAN DIPALI VIJAY | FEMALE | OBC | XII | | | |
| 6 | GAIKWAD SHILA DATTU | FEMALE | ST | XII | | | |
| 7 | GAYKWAD ASHOK RAMESH | MALE | OBC | XII | | | |
| 8 | JADHAV RAHUL RAJU | MALE | NT | XII | | | |
| 9 | KHAIRNAR VAISHNAVI KISAN | FEMALE | OBC | XII | | | |
| 10 | PATIL SHRIRANG GOKUL | MALE | OBC | XII | | | |
| 11 | RATHOD TULSIRAM HARICHANDRA | MALE | NT | XII | | | |
| 12 | SONAWANE SUNIL DEVIDAS | MALE | OBC | XII | | | |
| 13 | SONAWANE NIRAJ HIMMATRAO | MALE | ST | XII | | | |
| 14 | SURYAWANSHI ROHAN SANTOSH | MALE | OBC | XII | | | |
| 15 | TADAVI ALTAF IBRAHIM | MALE | ST | XII | | | |
| 16 | TADAVI MAJJID MAKABUL | MALE | ST | XII | | | |
| 17 | TADAVI YUNUS TAIYUB | MALE | ST | XII | | | |
| 18 | THAKUR JAYASHRI SHAILENDRA | FEMALE | ST | XII | | | |
| 19 | ZAMBARE LALIT DNYANDEO | MALE | OBC | XII | | | |

CERIFICATE

This is to certify that the documents regarding educational qualifications of the above students have been verified and found correct. The students mentioned in the list are eligible for the admission to the above mentioned course as per university ordinance-181.

Prof. Dr. Rakesh P. Chaudhari
Co-ordinator
Mobile No. - 9822768902



COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

ID-1046

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Roll No. Reg. No. Year |
|------------|-----------------|------------------|-----------|---|
| C/201662 | 01/10/19 | Rs. 500/- | | NGO 2019-19 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon

Respected Sir,
I requeste



d for the admission to Certificate Course in ~~Human Resource~~ N.G.O.
~~Management~~ ~~Management~~ of the Session 2018-2019

The necessary information for the admission is given below

1. Name in full - BADGUJAR ANKII SUNIL
(In Block Letters) Surname Name Middle Name
2. Mother Name AIKA SUNI BADGUJAR
3. Father Name Sunil Raghunath Badgujar
4. Date of Birth 08-06-1994
5. Caste : SC/ST/NT/SBC/OBC/OPEN OBC
6. Medium : Marathi / English Marathi
7. Present class MSW I year
8. Permanent Address Gayatri Nagar 2613, Shiroli Road, Jalgaon
(With Phone / Cell No.) 9168263883

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- ✓ 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Roll No. Reg. No. Year |
|------------|-----------------|------------------|-----------|---|
| C1/20/623 | 29/11/18 | ₹500/- | | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon



Respected Sir,
I requeste

d for the admission to Certificate Course in N.G.O

Management for the Session 2018-2019

The necessary information for the admission is given below

1. Name in full - Badhe Devedra Sudhakar
(In Block Letters) Surname Name Middle Name
2. Mother Name Badhe shushila Sudhakar
3. Father Name Badhe Sudhakar Vitthal
4. Date of Birth 15-07-1995
5. Caste : SC/ST/NT/SBC/OB/OPEN OB
6. Medium : Marathi / English Marathi
7. Present class 1st year
8. Permanent Address Khandapur. Tel = Ravar. Dist = Jalgaon.
(With Phone / Cell No.) 7262016128

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - M500-T |
|------------|-----------------|------------------|-----------|---|
| CI/DK/G31 | 24/9/18 | RS400/- | | Roll No. 038 Reg. No. 9832 Year - 2018-19 |

TD-1023

NGO

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon

Respected Sir,
I requeste



d for the admission to Certificate Course in N.G.O
Management for the Session 2018-2019

The necessary information for the admission is given below

1. Name in full - BHARSAT SACHIN GIRIDHAR
(In Block Letters) Surname Name Middle Name
2. Mother Name NARWADIBAI
3. Father Name SURDHAR SITARAM BHARSAT
4. Date of Birth 20/08/1997
5. Caste : SC/ST/NT/SBC/OBC/OPEN ST
6. Medium : Marathi / English MARATHI
7. Present class M500-T
8. Permanent Address AT DUMT POST MANIKHED TEL SURGANI DIST NRBHU
(With Phone / Cell No.) 8329459718, 7030096153

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LORSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

7D-1028

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Roll No. |
|------------|-----------------|------------------|-----------|--------------------------|
| C/Dc/636 | 29/9/18 | 15500/- | | Reg. No. Year 2018-19 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

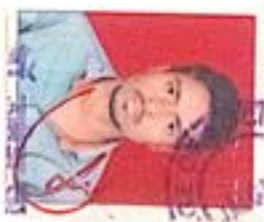
Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon

Respected Sir,
I requeste



d for the admission to Certificate Course in N.G.O. Management.

..... for the Session 2018-2019

The necessary information for the admission is given below

1. Name in full - CHANDHART LAKSHAMAN LONDHU
(In Block Letters) Surname Name Middle Name
2. Mother Name RAMANBAI LONDHU CHAUDHART
3. Father Name LONDHU BHILU CHAUDHART
4. Date of Birth 12/05/1996
5. Caste : SC/ST/NT/SBC/OBC/OPEN Hindu Konkani
6. Medium : Marathi / English Marathi
7. Present class 6th / 5th /
8. Permanent Address At. Kalyal Post Dharyshiwade, Tel Sakai dist Shule.
(With Phone / Cell No.) 9767142601

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Master I |
|------------|-----------------|------------------|-----------|--|
| 1175/1656 | 29/11/18 | ₹5600/- | | Roll No. 2018 Reg. No. 2018 Year 2018-19 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
College of Social Work, Jalgaon

Respected Sir,
I requeste



I for the admission to Certificate Course in N.G.O.

Management for the Session 2018-2019

The necessary information for the admission is given below

1. Name in full : Chayhan Dipali Vijay
(In Block Letters) Surname Name Middle Name
2. Mother Name : Chayhan Ashubai Vijay
3. Father Name : Chayhan Vijay
4. Date of Birth : 1 Jan 1996
5. Gate : SECRET/SHROOPEN DR.C
6. Medium : Marathi / English Marathi
7. Present class : Msw - I year
8. Permanent Address : At Takaki post Nimkhedi Bk Jalgaon
(With Phone / Cell No.) 919766586472

D. V. Ashubai
Signature of the Applicant

DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
COLLEGE OF SOCIAL WORK, JALGAON

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resources management.
- 2) Certificate Course in Child Counseling
- 3) Certificate Course in 'NGO Management'

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Roll No. Reg. No. Year 2016-16 2018-19 |
|------------|-----------------|------------------|--|---|
| C170C/S244 | 25/01/19 | Rs.500/- |  | NGO |

ID-1007

Remarks of the Selection Committee

The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work , Kusumba , Jalgaon



Respected Sir,

I requested for the admission to the 'NGO management' Course for the Session ~~2018-19~~ 18-19
The necessary information for the admission is given below

1. Name in full - Gaikwad Shilda Deebu
(In Block Letters) Surname Name Middle Name
2. Mother Name Gaikwad Parvati Deebu
3. Father Name Gaikwad Deebu Lakshman
4. Date of Birth 30/06/1996
5. Caste : SC/ST/NT/SBC/OBC/OPEN ST 6. Medium : Marathi / English Marathi
7. Educational Qualification MSW-II
8. Permanent Address B1 - Saijole, Post - Heltegal tel - Sursajana (Washik)
(With Phone / Cell No.) 96539225281


Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

ID-1057

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - NCO |
|------------|-----------------|------------------|-----------|--------------------------------------|
| CI/24/731 | 9/10/18 | ₹ 200/- | | Roll No. Reg. No. Year 2018-19 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon

Respected Sir,

I requeste

d for the admission to **Certificate Course in N.G.O. Management**

for the Session 2018-2019

The necessary information for the admission is given below

1. Name in full - GANESH Surname ASHOK Name RAMESH
(In Block Letters) Middle Name
2. Mother Name SAKKHAI MANGALA RAMESH
3. Father Name GANESH RAMESH RAMPRAO
4. Date of Birth 20-12-1996
5. Caste : SC/ST/NT/SBC/OBC/OPEN OBC
6. Medium : Marathi / English Marathi
7. Present class 10th year
8. Permanent Address Alp. Jamner. Shastri Nagar Jamner. Dist-Jalgaon.
- (With Phone / Cell No.) 7775230962

Signature of the Applicant





DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Roll No. Reg. No. Year |
|------------|-----------------|------------------|-----------|---|
| C1206114 | 28/9/18 | ₹ 400/- | | |

Remarks of the Selection Committee The candidate named above is/is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon

Respected Sir,
I requeste



d for the admission to Certificate Course in NGO

Management for the Session 2018-2019

The necessary information for the admission is given below

- 1 Name in full - JADHAV RAHUL RAJU
(In Block Letters) Surname Name Middle Name
2. Mother Name JADHAV INDUBAI RAJU
3. Father Name JADHAV RAJU SUKHDEV
4. Date of Birth 24 MARCH 1995
5. Case : SC/ST/NT/SBC/OBC/OPEN NT
6. Medium : Marathi / English MARATHI
7. Present class M.S.W.-I-4th Year.
8. Permanent Address AT POST PALDHI TEL-JAMNER DIST-JALGAON
(With Phone / Cell No.) 8368880750

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - PGW-F |
|------------|-----------------|------------------|-----------|---|
| C1/DC/654 | 29/9/18 | RS 500/- | | Roll No. 62 Reg. No. Year 2018-19 |

ID-10112

NGO

Remarks of the Selection Committee The candidate named above is/is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon



Respected Sir,
I requeste

d for the admission to Certificate Course in N.G.O.

Management for the Session 2018-2019

The necessary information for the admission is given below

- 1 Name in full - Khairnar Vaishnavi Kisan.
(In Block Letters) Surname Name Middle Name
2. Mother Name Khairnar Radhabai Kisan.
3. Father Name Khairnar Kisan Gokul
4. Date of Birth 06/02/1997
5. Caste : SC/ST/NT/SBC/OBC/OPEN OBC
6. Medium : Marathi / English Marathi
7. Present class MSW-I
8. Permanent Address At. Antulji, Tal. Murtainagar, Dist. Jalgaon
(With Phone / Cell No.) 9284130173

Signature of the Applicant



COLLEGE OF SOCIAL WORK, JALGAON

Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

22D-1037

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - M.S.U. II nd |
|------------|-----------------|------------------|-----------|---|
| C/Dr/644 | 29/9/18 | ₹51200/- | GA | Roll No. 77 Reg. No. 707 Year 2018-2019 |

Remarks of the Selection Committee The candidate named above is/is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
College of Social Work, Jalgaon



Respected Sir,
I requeste

d for the admission to Certificate Course in N.G.O. Management

for the Session 2018-2019

The necessary information for the admission is given below

- 1 Name in full - PATIL SHRIRAMG GOKUL
(In Block Letters) Surname Name Middle Name
- 2 Mother Name Rambhabai Gokul Patel
3. Father Name Gokul Babasaheb Patel
4. Date of Birth 15-07-1986
5. Caste : SC/ST/NT/SBC/OBC/OPEN oBc
6. Medium : Marathi / English Marathi
7. Present class M.S.U. IInd
8. Permanent Address Mear Nerd English school Nashkhabad
(With Phone / Cell No.) Jel,d's jalgaon. 7020568873

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - | Roll No. | Reg. No. | Year |
|------------|-----------------|------------------|-----------|---------|----------|----------|---------|
| 124/2019 | 23/10/18 | ₹5500/- | | NGO | | | 2018-19 |

Remarks of the Selection Committee The candidate named above is/is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
College of Social Work, Jalgaon

Respected Sir,
I requeste

d for the admission to Certificate Course in N.G.O.



TULASIRAM H. RATHOD
19-03-2018

..... for the Session 201 -201

The necessary information for the admission is given below

- 1 Name in full - RATHOD TULASIRAM HARICHAND
(In Block Letters) Surname Name Middle Name
2. Mother Name PRABODHANI
3. Father Name RATHOD HARICHAND SONGARSING
4. Date of Birth 03-10-1986
5. Caste : SC/ST/N/SBC/OBC/OPEN
6. Medium : Mahrathi / English
7. Present class M.S.V-I
8. Permanent Address AT POST KHERGE TANDRA TAL CHALTSI SORAN
(With Phone / Cell No.) 975-7468041 - 8390621951

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

07/10/2018

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
2) Certificate Course in N.G.O. Management
3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

TD-1053

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - NIGO |
|------------|-----------------|------------------|-----------|--------------------------------------|
| CI/201696 | 11/10/18 | Rs.500/- | | Roll No. Reg. No. Year 2018-19 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon



Respected Sir,
I requeste

d for the admission to Certificate Course in ~~Human Resource~~ Management.

N.G.O. Management for the Session 2018-2019

The necessary information for the admission is given below

- 1 Name in full - SONAWANE SUNITL DEVIDAS
(In Block Letters) Surname Name Middle Name
2. Mother Name GRAVKARNABAI DEVIDAS SONAWANE
3. Father Name DEVIDAS RAMDAS SONAWANE
4. Date of Birth 03/08/1988
5. Caste : SC/ST/NT/SBC/OB/OPEN OB.
6. Medium : Marathi / English MARATHI
7. Present class MSW-I
8. Permanent Address AI/POST - SUNNARGAON BK
(With Phone / Cell No.) TRL - JAMNER, DIST - TALHADA (425114)
Mob. No - 8208944830, 7588814454

Signature of the Applicant

SONAWANE SUNITL D,





DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form



For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

TD-1056

NGO

| Receipt No | Date of Payment | Amount Deposited | Signature | Class -  | Roll No. 70 |
|------------|-----------------|------------------|--|---|--------------|
| c1/Dd/730 | 9/10/18 | ₹.400/- |  | Reg. No. | Year 2018-19 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon

Respected Sir,
I requeste



d for the admission to Certificate Course in N.G.O
Management for the Session 2018-2019

The necessary information for the admission is given below

1. Name in full . SANAWANE NIRAJ HIMMATRAO
(In Block Letters) Surname Name Middle Name
2. Mother Name SANAWANE JYOTI HIMMATRAO
3. Father Name SANAWANE HIMMATRAO RAJARAM
4. Date of Birth 16/07/1996
5. Caste : SC/ST/NT/SBC/OBC/OPEN ST
6. Medium : Marathi / English MARATHI
7. Present class MSW I YEAR
8. Permanent Address SANE CURBUI NAGAR, JAWAL ROAD, CHR
(With Phone / Cell No.) 9511264583

Signature of The Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

ID-1051

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - N.G.O |
|------------|-----------------|------------------|-----------|--------------------------------------|
| 21/02/1895 | 11/10/18 | 500/- | e | Roll No. Reg. No. Year 2018-19 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon



Respected Sir,
I requeste

d for the admission to Certificate Course in N.G.O. management

----- for the Session 2018-2019

The necessary information for the admission is given below

- 1 Name in full - Suryawanshi Rohan Santosh
(In Block Letters) Surname Name Middle Name
2. Mother Name *meenabai
3. Father Name Santosh Nilkanth Suryawanshi
4. Date of Birth 21/02/1996
5. Caste : SC/ST/NT/SBC/OBC/OPEN OBC
6. Medium : Marathi / English marathi
7. Present class M.S.H.I
8. Permanant Address AT/Post - Marwad TALAMALNER
(With Phone / Cell No.) Dist Jalgaon - 9156995450

RSE
Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

7D-1058

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - MSW II |
|------------|-----------------|------------------|-----------|----------------|
| C/204713 | 31/01/18 | RS 500/- | | Roll No. 55 |
| | | | | Reg. No. |
| | | | | Year 2018/19 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon



Respected Sir,
I requeste

d for the admission to Certificate Course in N.G.O
Management for the Session 2018-2019

The necessary information for the admission is given below

- 1 Name in full - Tadavi Altuf Ibrahim
(In Block Letters) Surname Name Middle Name
2. Mother Name Tadavi Amina Ibrahim
3. Father Name Tadavi Ibrahim Samsher
4. Date of Birth 10 / 02 / 1996
5. Caste : SC/ST/NT/SBC/OBC/OPEN ST
6. Medium : Marathi / English Marathi
7. Present class _____
8. Permanant Address Plot No-05 pandurang saaf Nagar yawal
(With Phone / Cell No.) 7757868673

Signature of the Applicant


DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
COLLEGE OF SOCIAL WORK, JALGAON

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resources management.
- 2) Certificate Course in Child Counseling
- ✓ 3) Certificate Course in 'NGO Management'

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - M.S.W - II |
|------------|-----------------|------------------|--|---|
| C/00712 | 3/10/18 | ₹.500/- |  | Roll No. 56 Reg. No. Year 2018-19 |

ID - 1057

Remarks of the Selection Committee

The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

To,
The Principal
college of Social Work , Kusumba , Jalgaon



Respected Sir,

I requested for the admission to the Certificate Course in NGO Management Course for the Session 2015-16.

The necessary information for the admission is given below

1 Name in full - TADAVI MAJJID MAKBUL
(In Block Letters) Surname Name Middle Name

2. Mother Name AINURBAI

3. Father Name MAKBUL

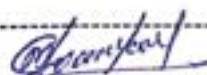
4. Date of Birth 01/06/2018

5. Caste : SC/ST/NT/SBC/OBC/OPEN ST 6. Medium : Marathi / English Marathi

7. Educational Qualification M.S.W.

8. Permanant Address AT. post. LOHARA

(With Phone / Cell No.) 9595312117


Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

ID-1045

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - N.G.O. Management |
|------------|-----------------|------------------|-----------|---|
| C/DC/67 | 29/11/18 | 0500/- | | Roll No. 99 Reg. No. 709 Year 2018-19 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon



YUNUS T. TADAVI
DATE: 28/02/2018

Respected Sir,

I requeste

d for the admission to Certificate Course in N.G.O.

Management for the Session 2018-2019.

The necessary information for the admission is given below

1 Name in full - Tadavi Yunus Tajjub
(In Block Letters) Surname Name Middle Name

2. Mother Name Shahifa

3. Father Name Tajjub

4. Date of Birth 18-7-1999

5. Caste : SC/ST/NT/SBC/OBC/OPEN ST

6. Medium : Marathi / English Marathi

7. Present class B.S.W. II

8. Permanant Address At. TadJinji, Post. Akhada, Tal. Raveer, Dist Jalgaon

(With Phone / Cell No.) 992-1809454

Signature of the Applicant



COLLEGE OF SOCIAL WORK, JALGAON

Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

I.D - 1041

NGO

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - MSW-I |
|------------|-----------------|------------------|-----------|---------------|
| DC/653 | 29/9/18 | ₹.500/- | | Roll No. ST |
| | | | | Reg. No. |
| | | | | Year 2018-19 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon



Respected Sir,
I requeste

d for the admission to Certificate Course in N.G.O.
management for the Session 2018-2019

The necessary information for the admission is given below

- 1 Name in full - Thakur Jayashei Shailendra.
(In Block Letters) Surname Name Middle Name
2. Mother Name Thakur Manisha Shailendra,
3. Father Name Thakur Shailendra Vitthal.
4. Date of Birth 05-03-1997.
5. Caste : SC/ST/NT/SBC/OBC/OPEN ST
6. Medium : Marathi / English Marathi.
7. Present class MSW-I year.
8. Permanant Address Janki Nagar, Pandy chock, Jalgaon.
(With Phone / Cell No.) 9860085700

Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- ✓ 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

ID-1059

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - NCO |
|------------|-----------------|------------------|-----------|--------------------------------------|
| c/3d733 | 9/10/18 | RS-300/- | | Roll No. Reg. No. Year 2018-19 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon



Respected Sir,
I requeste

d for the admission to Certificate Course in N.G.O. Management

for the Session 2018-2019

The necessary information for the admission is given below

- 1 Name in full - ZAMBARE LAIT DNYANDEO
(In Block Letters) Surname Name Middle Name
2. Mother Name ZAMBARE SUREKHA DNYANDEO
DNYANDEO PANDHARINATH
3. Father Name ZAMBARE
4. Date of Birth 06-09-1993
5. Caste : SC/ST/NT/SBC/OBC/OPEN OBC
6. Medium : Marathi / English Marathi
7. Present class M.S.W I Year
8. Permanant Address A/P. BHADLI B.K. Dist. JALGAON.
(With Phone / Cell No.) 8657826344

Signature of the Applicant



Dhanaji Nana Chaudhari Vidya Prabodhini
**LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK,
JALGAON**

Student Admission Report

From Date 01/06/2019 To 28/09/2019

Session : 2019-2020

Course : CC NGO MGT

| Sr. No. | Roll No | Student Id | STUDENT NAME |
|----------------------|---------|------------|----------------------------|
| CC NGO MGT | | | |
| Section : --- | | | |
| 1 | | 2144518 | ASWAR VIKRAM SANTOSH |
| 2 | | 2107498 | BHOYE FULA SURESH |
| 3 | | 2179315 | BRAHAMANE SHUBHANGI SHALIK |
| 4 | | 2144101 | DHANGAR DIPAK KAILAS |
| 5 | | 2144097 | DHANGAR PANKAJ KAILAS |
| 6 | | 2145557 | GAVALI DINKAR GANGARAM |
| 7 | | 2144389 | KALE TEJASWINI MARUTI |
| 8 | | 2170094 | KATKAR PAVAN WASUDEO |
| 9 | | 2143199 | KHAMBAYAT POOJA CHINTAMAN |
| 10 | | 2143026 | MARATHE KOMAL BHAGWAN |
| 11 | | 2169639 | PARADESHI SHUBHAM SURESH |
| 12 | | 2127358 | PATIL VAISHALI PRAKASH |
| 13 | | 2110107 | PAWAR SHRIKANT BADRINATH |
| 14 | | 2177487 | PAWARA RUPSING MERAJYA |
| 15 | | 2127420 | SATDIVE KARUNA GAUTAM |
| 16 | | 2127430 | SURYAVANSHI SHITAL RAMBHAU |
| 17 | | 2145642 | SURYAWANSHI ARCHANA VASANT |
| 18 | | 2116417 | TADAVI SANJANA ARMAN |
| 19 | | 2144425 | WAGH SAVITA PRAKASH |
| 20 | | 2177484 | WARDE MURLIDHAR JIVA |



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - N.G.O |
|------------|-----------------|------------------|-----------|--------------------------------------|
| C10/272 | 13/9/2019 | RS.600/- | | Roll No. Reg. No. Year 2019-20 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in N.G.O.

Management for the Session 2019-20+20 .

The necessary information for the admission is given below .

- 1 Name in full - Marathe Komal Bhagwan.
(In Block Letters) Surname Name Middle Name
2. Mother Name Nirmala Bhagwan Marathe
3. Father Name Bhagwan Shanker Marathe
4. Date of Birth 8/11/1998
5. Caste : SC/ST/NT/SBC/OBC/OPEN open
6. Medium : Marathi / English Marathi
7. Present class BSW-III
8. Permanent Address Gradegan, post Neri, Jalgaon.
(With Phone / Cell No.) 7507109461

Komal

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - ^{N.G.O} MSW-III |
|------------|-----------------|------------------|-----------|--|
| c10/318 | 30/9/19 | Rs-1200/- | | Roll No. 72 Reg. No. Year 2019-20 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in N.G.O

management for the Session 2019-2020

The necessary information for the admission is given below

- 1 Name in full - Patil Dipak Bharat
(In Block Letters) Surname Name Middle Name
2. Mother Name Patil Susekha Bharat
3. Father Name Patil Bharat Borkar
4. Date of Birth 10-march-1997
5. Caste : SC/ST/NT/SBC/OBC/OPEN OBC
6. Medium : Marathi / English Marathi
7. Present class MSW-II year
8. Permanent Address At. Ajande, Post. Dahiwad, Tal. Shirpur (Dhule)
(With Phone / Cell No.) 7770053942

Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - BSc HGO |
|---------------|-------------------|------------------|-----------|---|
| G10/310 02 | 4/9/19 30-9-19 | 600/- | | Roll No. 18 Reg. No. Year 2019-20 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in N.G.O. Management.

_____ for the Session 2019-2020

The necessary information for the admission is given below

- 1 Name in full - Marathe Mansi Sanjay
(In Block Letters) Surname Name Middle Name
2. Mother Name Nita Sanjay Marathe
3. Father Name Sanjay Narayan Marathe
4. Date of Birth 13/3/1998
5. Caste : SC/ST/NT/SBC/OBC/OPEN open
6. Medium : Marathi / English Marathi
7. Present class B50 - III
8. Permanent Address 347 'Shivaneri' Shivaji Nagar, Jalgaon.
(With Phone / Cell No.) 9403606472

Mansi
Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - HLOM/P |
|------------|-----------------|------------------|-------------|--------------------------------------|
| 40 | 16/9/19 | 500/- | [Signature] | Roll No. Reg. No. Year - 19.20 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in N.G.O.

Management for the Session 2019-2020

The necessary information for the admission is given below

- 1 Name in full - Aswar Vikram Santosh
(In Block Letters) Surname Name Middle Name
2. Mother Name Aswar Sarala Santosh
3. Father Name Aswar Santosh Bhendu
4. Date of Birth 16-09-1995
5. Caste : SC/ST/NT/SBC/OBC/OPEN OBC
6. Medium : Marathi / English Marathi
7. Present class Yes
8. Permanent Address Om Nagar Shirsoli P.B. Tal. Jalgaon Jalgaon
(With Phone / Cell No.) 7875179668

[Signature]
Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Roll No. Reg. No. Year |
|------------|-----------------|------------------|-----------|---|
| 257 | 24/8/2019 | Rs 600/- | | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon



Respected Sir,
I requeste

d for the admission to Certificate Course in N.G.O
Manegement for the Session 201 -201

The necessary information for the admission is given below

- 1 Name in full - Bhoye fula suresh
(In Block Letters) Surname Name Middle Name
2. Mother Name Bhoye sumitra suresh
3. Father Name Bhoye suresh tukaram
4. Date of Birth 8-1-1996
5. Caste : SC/ ST/ NT/ SBC/ OBC/ OPEN
6. Medium : Marathi / English
7. Present class -
8. Permanant Address At Post - Nanduri Ta. Kalvan
(With Phone / Cell No.) 9422714043

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Roll No. Reg. No. Year |
|------------|-----------------|------------------|-----------|---|
| C10/313 | ₹ 27/9/19 | ₹.700/- | | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in NGO

Management for the Session 2019-2020

The necessary information for the admission is given below

- 1 Name in full - Brahmane s shubhangi shalik
(In Block Letters) Surname p Name Middle Name
2. Mother Name Brahmane sunanda shalik
3. Father Name Brahmane shalik ramdas
4. Date of Birth 16/04/1997
5. Caste : SC ST NT SBC OBC OPEN
6. Medium : Marathi / English marathi / English
7. Present class M.G.K. second year
8. Permanent Address M.T.D.C. sayadhyo nagar Jalgaon
(With Phone / Cell No.) 7709500302

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- ✓ 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Roll No. Reg. No. Year |
|------------|-----------------|------------------|-----------|---|
| 290 | 14/11/19 | 600 ✓ | | N.G.O 2019-20 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in

NGO

for the Session 2019-2020

The necessary information for the admission is given below

- 1 Name in full - DHANGAR DIPAK KAILAS
(In Block Letters) Surname Name Middle Name
2. Mother Name RATNABAT KAILAS DHANGAR
3. Father Name KAILAS AMRUT DHANGAR
4. Date of Birth 16/05/1996
5. Caste : SC/ST/NT/SBC/OBC/OPEN NT - C
6. Medium : Marathi / English marathi
7. Present class MSW - I
8. Permanent Address At. Jaykhede K4. Tal. Frandol Dist Jalgaon.
(With Phone / Cell No.) 7776906441 , 8208514204

Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- ✓ 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - MGO |
|------------|-----------------|------------------|-----------|--------------------------------------|
| 279 | 14/2/19 | 600/- | | Roll No. Reg. No. Year 2019-20 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in _____

NGO for the Session 2019-2020

The necessary information for the admission is given below

- 1 Name in full - OHANGAR PANKAJ KAILAS
(In Block Letters) Surname Name Middle Name
2. Mother Name RATNABAI KAILAS DHANGAR
3. Father Name KAILAS AMRUT DHANGAR
4. Date of Birth 06/05/1994
5. Caste : SC/ST/NT/SBC/OBC/OPEN NT - C
6. Medium : Marathi / English MARATHI
7. Present class MSW - II
8. Permanent Address Javkhede kh. Tel. exandol
(With Phone / Cell No.) 7776886870

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - N.G.O |
|------------|-----------------|------------------|-------------|---------------|
| 293 | 10/11/19 | 500/- | [Signature] | Roll No. |
| | | | | Reg. No. |
| | | | | Year 2019-20 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in N.G.O management

for the Session 2019-2020

The necessary information for the admission is given below

1 Name in full - GAVALI DINKAR GANGARAM
(In Block Letters) Surname Name Middle Name

2. Mother Name RANJANABAI

3. Father Name GANGARAM LAHANU GAVALI

4. Date of Birth 05/11/1995

5. Caste : SC/ST/NT/SBC/OBC/OPEN ST

6. Medium : Marathi / English Marathi

7. Present class MSW-IInd yr.

8. Permanent Address At Umburde Post-mani Tal-Surgana, Nashik

(With Phone / Cell No.) 8935359065 / 9325101971

[Signature]
Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- ✓ 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - MCO |
|------------|-----------------|------------------|-----------|-------------|
| 43 | 16/9/19 | 600/- | | Roll No. |
| | | | | Reg. No. |
| | | | | Year 1920 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in N.G.O

_____ for the Session 2019-2020

The necessary information for the admission is given below

1 Name in full - Tejaswini Maruti Kale
(In Block Letters) Surname Name Middle Name

2. Mother Name Bhardi

3. Father Name Maruti

4. Date of Birth 15-9-1999

5. Caste : SC/ST/NT/SBC/OBC/OPEN NT (C)

6. Medium : Marathi / English Marathi

7. Present class T.Y. BSW

8. Permanent Address Saygaon Tel. Chalisgaon Dist. Jalgaon

(With Phone / Cell No.) 7743925355

Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - N60 |
|------------|-----------------|------------------|-----------|--------------------------------------|
| C10/304 | 21/9/2019 | ₹.600/- | | Roll No. Reg. No. Year 2019-20 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in N.G.O. Management.

----- for the Session 2019-2020

The necessary information for the admission is given below

1 Name in full - KATKAR PAVAN WASUDEO
(In Block Letters) Surname Name Middle Name

2. Mother Name MANORAMABAI

3. Father Name WASUDEO

4. Date of Birth 20-01-1997

5. Caste : SC/ST/NT/SBC/OBC/OPEN OBC

6. Medium : Marathi / English Marathi

7. Present class M.S.W, II year

8. Permanent Address AT - Narayanpur, Po - Nimgaon, Ta - Nandura, Dist - Buldhana
(With Phone / Cell No.) 8390108849

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - BSW III ^{NGO} |
|------------|-----------------|------------------|-----------|---|
| 274 | 13-09-2019 | 500 | | Roll No. 73 Reg. No. Year 2019/20 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in N.G.O

management for the Session 2019-2020

The necessary information for the admission is given below

- 1 Name in full - khambayt Pooia chintaman
(In Block Letters) Surname Name Middle Name
2. Mother Name Pomvati
3. Father Name chintaman
4. Date of Birth 07/10/1999
5. Caste : SC/ST/NT/SBC/OBC/OPEN ST
6. Medium : Marathi / English marathi
7. Present class BSW III
8. Permanent Address at. po. Tal - Surqana
(With Phone / Cell No.) Di - Nashik

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class |
|------------|-----------------|------------------|-------------|-------------------------|
| C10/300 | 20/19/2019 | RS.500/- | (Signature) | NGO Child Counseling |
| | | | | Roll No. |
| | | | | Reg. No. |
| | | | | Year 2019-20 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in N.G.O Management

for the Session 2019-2020

The necessary information for the admission is given below

1. Name in full - Pardeshi Shubham Suresh
(In Block Letters) Surname Name Middle Name
2. Mother Name Pardeshi Jayabai Suresh
3. Father Name Pardeshi Suresh Gulchand
4. Date of Birth 08/03/1997
5. Caste : SC/ST/NT/SBC/OBC/OPEN OBC
6. Medium : Marathi / English Marathi
7. Present class Yes
8. Permanent Address At. Shahapurva Tal. Pachova Dist. Jalgaon
(With Phone / Cell No.) 9172423563

(Signature)
Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- ✓ 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Roll No. Reg. No. Year |
|------------|-----------------|------------------|-----------|---|
| 259 | 20/8/19 | 400/- | | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon



Respected Sir,
I requeste

d for the admission to Certificate Course in Certificate Course in
NGO Management for the Session 2019-2020

The necessary information for the admission is given below

- 1 Name in full - Pawar Shrikant Badrinath
(In Block Letters) Surname Name Middle Name
2. Mother Name Vimalbai
3. Father Name Badrinath
4. Date of Birth 15 Aug 1997
5. Caste : SC/ST/NT/SBC/OBC/OPEN VINT
6. Medium : Marathi / English Marathi
7. Present class BSW - III
8. Permanant Address At. po. Khedgaon Tel. Erandol Dist. Jalgaon.
(With Phone / Cell No.) 7875636275

Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Recpt No | Date of Payment | Amount Deposited | Signature | Class - Roll No. Reg. No. Year |
|----------|-----------------|------------------|-----------|---|
| 010/210 | 22/9/2019 | ₹2400/- | | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in NGO MANAGEMENT

for the Session 2019-2020

The necessary information for the admission is given below

- 1 Name in full - PAWARA RUPSING MERAJYA
(In Block Letters) Surname Name Middle Name
2. Mother Name AAHALIBAI
3. Father Name MERAJYA JAGYA PAWARA
4. Date of Birth 05-06-1995
5. Caste : SC/ST/NT/SBC/OBC/OPEN ST
6. Medium : Marathi / English MARATHI
7. Present class _____
8. Permanent Address AT- MANKHEDI POST- RADEKALAM TAL- JALGAON DIST. NANDURBAR
(With Phone / Cell No.) 9403122009, 7057104608

Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - MSW II ^{NGO mgt.} |
|------------|-----------------|------------------|--------------------|--|
| C/10/267 | 9/9/2019 | Rs. 600/- | <i>[Signature]</i> | Roll No. 101 Reg. No. 201 Year 2019-2020 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
college of Social Work, Jalgaon



Respected Sir,
I requeste

d for the admission to Certificate Course in N.G.O.
Management for the Session 2019-2020

The necessary information for the admission is given below

1 Name in full - SATDIVE KARUNA GAUTAM
(In Block Letters) Surname Name Middle Name

2. Mother Name SATDIVE KARMADA GAUTAM

3. Father Name SATDIVE GAUTAM MOHAN

4. Date of Birth 14/04/1989

5. Caste : SC/ST/NT/SBC/OBC/OPEN SC

6. Medium : Marathi / English MARATHI

7. Present class MSW 1st year

8. Permanant Address PANCHASHIL NAGAR BHUSAWAL

(With Phone / Cell No.) 9399932930

[Signature]
Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - N.G.O. N.Y.F |
|------------|-----------------|------------------|-----------|--------------------------------------|
| e/10/270 | 7/9/2019 | Rs. 600/- | | Roll No. Reg. No. Year 2019-20 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal



To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon

Respected Sir,

I requested for the admission to Certificate Course in N.G.O

Management for the Session 2019-2020

The necessary information for the admission is given below

1 Name in full - SURYAVANSHI SHITAL RAMBHAU
(In Block Letters) Surname Name Middle Name

2. Mother Name SURYAVANSHI MINA RAMBHAU
3. Father Name SURYAVANSHI RAMBHAU PIRAJI

4. Date of Birth 17/02/1997

5. Caste : SC/ST/NT/SBC/OBC/OPEN SC
6. Medium : Marathi / English MARATHI

7. Present class M.S.W - II

8. Permanent Address AT. POST - MHATSIWADI TAL - MALKAPUR
Dist - BULDHANI



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - ^{NGO} MSW-2019 |
|------------|-----------------|------------------|-----------|--|
| 276 | 12/19/19 | 500/- | | Roll No. 78 Reg. No. Year 2019-20 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in N.G.O. Management

for the Session 2019-2020

The necessary information for the admission is given below

- 1 Name in full - SURYAWANSHI ARCHANA VASANT
(In Block Letters) Surname Name Middle Name
2. Mother Name SURYAWANSHI KALYANI VASANT
3. Father Name SURYAWANSHI VASANT KASHINATH
4. Date of Birth 23/09/97
5. Caste : SC/ST/NT/SBC/OBC/OPEN OBC
6. Medium : Marathi / English MARATHI
7. Present class MSW - II YEAR
8. Permanent Address 22/50 K.C. PARK, KANALADA ROAD,
(With Phone / Cell No.) SHIVAJI NAGAR, JAL. (8411938063)

Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - ^{MCO} MSW II year |
|------------|-----------------|------------------|--------------------|---|
| 45 | 16/11/19 | 200/- | <i>[Signature]</i> | Roll No. 80 Reg. No. Year 2019-20 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in N.G.O

management for the Session 2019-2020

The necessary information for the admission is given below

1 Name in full - WAGH SAVITA PRAKASH
(In Block Letters) Surname Name Middle Name

2. Mother Name Wagh kamal Prakash

3. Father Name Wagh Prakash Ninu

4. Date of Birth 27/11/1997

5. Caste : SC/ST/NT/SBC/OBC/OPEN NT - C

6. Medium : Marathi / English Marathi

7. Present class MSW II year

8. Permanent Address At Po. khankheola, Tal. mukhinayak, Dist. Jalga

(With Phone / Cell No.) 9604189343

9552459827 - Brother

[Signature]
Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Roll No. Reg. No. Year |
|------------|-----------------|------------------|-----------|---|
| 110/309 | 23/9/2019 | ₹-400/- | | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in N.G.O. MANAGEMENT

for the Session 2019-2020

The necessary information for the admission is given below

- 1 Name in full - WARDE MURLIDHAR JIVA
(In Block Letters) Surname Name Middle Name
2. Mother Name MOHANABAI JIVA WARDE
3. Father Name JIVA MANGALU WARDE
4. Date of Birth 22/02/1998
5. Caste : SC/ST/NT/SBC/OBC/OPEN S.T
6. Medium : Marathi / English MARATHI
7. Present class _____
8. Permanent Address AT- PIMPALCHOND TEL- SURAGANA DIST- NASHIK
(With Phone / Cell No.) 9067950851

Signature of the Applicant

List of admitted students for Career Oriented Courses under Ordinance 181

- 1) Name of the College - Dhanaji Nana Chaudhari Vidya Prabodhini's
Loksevak Madhukarrao Chaudhari College of Social Work , Jalgaon
- 2) Name of Career oriented Course - Certificate Course in N.G.O. Management
- 3) Academic Year - 2020- 2021
- 4) Intake Capacity - 60

| Sr. No. | Full name of the Students | Gender | Category | Educational Qualification # | Year of passing. Cert./Diploma Course (Applicable only for Diploma & Adv. Diploma Course) | Presently admitted Class (F.Y.,S.Y.,T. Y./P.G. | Remark (If Any) |
|---------|------------------------------|--------|----------|-----------------------------|---|---|------------------|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| 1 | BADGUJAR RENUKA DNYANESHWAR | FEMALE | OBC | XII | | | |
| 2 | BHALERAO VISHWAPRABHA SHARAD | FEMALE | SC | XII | | | |
| 3 | JAWALE MANASI PRAVIN | FEMALE | OBC | XII | | | |
| 4 | KAROSIYA NEHA DINESH | FEMALE | SC | XII | | | |
| 5 | MAHAJAN SHIVANI RAJENDRA | FEMALE | OBC | XII | | | |
| 6 | PATIL ATHARVA VINAY | MALE | OBC | XII | | | |
| 7 | PATIL CHAITALI ASHOK | FEMALE | OBC | XII | | | |
| 8 | PATIL NILIMA RAVAN | FEMALE | OBC | XII | | | |
| 9 | RAJPUT VIJAY NAVALSING | MALE | EWS | XII | | | |
| 10 | SONAWANE VAISHALI NANABHAU | FEMALE | SC | XII | | | |
| 11 | TADVI MUSKAN IBRAHIM | FEMALE | ST | XII | | | |
| 12 | WANKHEDE SANJANA KISHOR | FEMALE | OBC | XII | | | |



CERIFICATE



This is to certify that the documents regarding educational qualifications of the above students have been verified and found correct. The students mentioned in the list are eligible for the admission to the above mentioned course as per university ordinance-181.



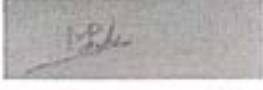
Co-ordinator

Mobile No. -

Session 2020-2021

| | | | | |
|---|--|--|-----------------------------|---|
|  | LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK Jalgaon | | College Code :LMCCSW |  |
| | For College use only | Course Applied to: CC NGO MGT Admission Date : 09/02/2021 | Registration No. 1023763 | |
| 01. Personal Information Section | | | | |
| | LAST NAME | FIRST NAME | MIDDLE NAME | |
| Name of the Student | BADGUJAR | RENUKA | DNYANESHWAR | |
| Father's Name | DNYANESHWAR | | | |
| Mother's Name : | USHA | | | |
| Marital Status : | UnMarried | Saral No. : | | |
| Date of Birth : | 28/10/2000 | Gender : | Female | |
| Place of Birth : | LASGAON | Blood Group : | AB- | |
| Grandfather Name : | | | Native Place : | |
| Voter ID Card No. : | Organ Donor : | NO | Medium : Marathi | |
| Bank Name : | Account No. : | Transaction Type : ONLINE | | |
| Religion : | HINDU | Citizenship of : | Indian | |
| Aadhar Card No. : | 313628909203 | Driving Licence No. : | Minority: NO | |
| 02. Address Details | | | | |
| Address for Correspondence: | At post lasgaon tq pachora dist jalgaon | | Pin Code : 425115 | |
| State : MAHARASHTRA | District : JALGAON | Tehsil : PACHORA | City : LASGAON | |
| Permanent Address | At post lasgaon tq pachora dist jalgaon | | Pin Code : 425115 | |
| State : MAHARASHTRA | District : JALGAON | Tehsil : PACHORA | City : LASGAON | |
| 03. Contact Details | | | | |
| Student Phone : | | | Parent Phone : | |
| Student Mobile No.: | 9764638372 | Student Email Id: Renukabadgujar2000@gmail.com | | |
| 04. Legal Reservation Information Section | | | | |
| Domicile State : | MAHARASHTRA | Type of Category : | Caste Category : OBC | |
| Sub Caste : | BADGUJAR | Phy. Handicapped : | | |
| Caste Certificate No. : | Learning Disability No. : | | | |
| 05. Social Reservation (Special Category) Information Section | | | | |

| | | | | |
|---|--|--|------------------------------------|---|
|  | LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK Jalgaon | | College Code :LMCCSW |  |
| | For College use only | Course Applied to: CC NGO MGT Admission Date : 05/02/2021 | Registration No. 1021467 | |
| 01. Personal Information Section | | | | |
| | LAST NAME | FIRST NAME | MIDDLE NAME | |
| Name of the Student | BHALERAO | VISHWAPRABHA | SHARAD | |
| Father's Name | SHARAD | | | |
| Mother's Name : | SHUSHMA | | | |
| Marital Status : | UnMarried | Saral No. : | | |
| Date of Birth : | 26/05/1998 | Gender : | Female | |
| Place of Birth : | JALGAON | Blood Group : | O+ | |
| Grandfather Name : | | Native Place : | | |
| Voter ID Card No. : | | Organ Donor : | NO | Medium : Marathi |
| Bank Name : | | Account No. : | | Transaction Type : ONLINE |
| Religion : | BHUDHIST | Citizenship of : | Indian | U-DISE No. : |
| Aadhar Card No. : | 238631481460 | Driving Licence No. : | | Minority: NO |
| 02. Address Details | | | | |
| Address for Correspondence: | | | | Pin Code : 425001 |
| State : MAHARASHTRA | District : JALGAON | Tehsil : JALGAON | City : JALGAON | |
| Permanent Address | | | | Pin Code : 425001 |
| State : MAHARASHTRA | District : JALGAON | Tehsil : JALGAON | City : JALGAON | |
| 03. Contact Details | | | | |
| Student Phone : | | Parent Phone : | | |
| Student Mobile No.: | 8767882762 | Student Email Id: | vishwaprabhabhalerao@gmail.com | |
| 04. Legal Reservation Information Section | | | | |
| Domicile State : | | Type of Category : | | Caste Category : SC |
| Sub Caste : | | Phy. Handicapped : | | |
| Caste Certificate No. : | | Learning Disability No. : | | |
| 05. Social Reservation (Special Category) Information Section | | | | |

| | | | | |
|---|---|-------------------------------|---------------------------|--|
|  | LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK Jalgaon | | College Code :LMCCSW |   |
| | For College use only | Course Applied to: CC NGO MGT | Registration No. 1020788 | |
| Admission Date : 18/03/2021 | | | | |
| 01. Personal Information Section | | | | |
| | LAST NAME | FIRST NAME | MIDDLE NAME | |
| Name of the Student | JAWALE | MANASI | PRAVIN | |
| Father's Name | PRAVIN BHASKAR JAWALE | | | |
| Mother's Name : | DIPALI | | | |
| Marital Status : | UnMarried | Saral No. : | | |
| Date of Birth : | 18/03/2000 | Gender : | Female | |
| Place of Birth : | SAVADA | Blood Group : | B+ | |
| Grandfather Name : | | | Native Place : | |
| Voter ID Card No. : | Organ Donor : | NO | Medium : Marathi | |
| Bank Name : | Account No. : | Transaction Type : ONLINE | | |
| Religion : | HINDU | Citizenship of : | Indian | |
| Aadhar Card No. : | 896335347205 | Driving Licence No. : | Minority: NO | |
| 02. Address Details | | | | |
| Address for Correspondence: | AT,POST DO,KATHORA | | Pin Code : 425301 | |
| State : MAHARASHTRA | District : JALGAON | Tehsil : YAWAL | City : YAWAL | |
| Permanent Address | AT,POST DO,KATHORA | | Pin Code : 425301 | |
| State : MAHARASHTRA | District : JALGAON | Tehsil : YAWAL | City : YAWAL | |
| 03. Contact Details | | | | |
| Student Phone : | 9545580140 | Parent Phone : | | |
| Student Mobile No.: | 9284826218 | Student Email Id: | jawalemansi8@gmail.com | |
| 04. Legal Reservation Information Section | | | | |
| Domicile State : | MAHARASHTRA | Type of Category : | Caste Category : OBC | |
| Sub Caste : | LEWA PATIDAR | Phy. Handicapped : | | |
| Caste Certificate No. : | | | Learning Disability No. : | |
| 05. Social Reservation (Special Category) Information Section | | | | |



**LOKSEVAK MADHUKARRAO CHAUDHARI
COLLEGE OF SOCIAL WORK**

Jalgaon

College Code
:LMCCSW



For College
use only

Course Applied to: CC NGO MGT

Admission Date 26/2/21

Registration No.

1022846



01. Personal Information Section

| | LAST NAME | FIRST NAME | MIDDLE NAME |
|--------------------------------|-------------------------|---------------------------|-------------------|
| Name of the Student | KAROSIYA | NEHA | DINESH |
| Father's Name | DINESH | | |
| Mother's Name : | SHOBHA | | |
| Marital Status : | UnMarried | | Saral No. : |
| Date of Birth : | 05/03/1999 | | Gender : Female |
| Place of Birth : | JALGAON | | Blood Group : AB+ |
| Grandfather Name : | | | Native Place : |
| Voter ID Card No. : | Organ Donar : NO | Medium : Marathi | |
| Bank Name : | Account No. : | Transaction Type : ONLINE | |
| Religion : HINDU | Citizenship of : Indian | U-DISE No. : | |
| Aadhar Card No. : 652574407809 | Driving Licence No. : | Minority: NO | |

02. Address Details

| | | | |
|-----------------------------|--------------------|------------------|-------------------|
| Address for Correspondence: | shani peth | | Pin Code : 425001 |
| State : MAHARASHTRA | District : JALGAON | Tehsil : | City : JALGAON |
| Permanent Address | shani peth | | Pin Code : 425001 |
| State : MAHARASHTRA | District : JALGAON | Tehsil : JALGAON | City : JALGAON |




03. Contact Details

| | |
|--------------------------------|---------------------------------------|
| Student Phone : | Parent Phone : |
| Student Mobile No.: 9623255556 | Student Email Id: nehakao27@gmail.com |

04. Legal Reservation Information Section

| | | |
|-------------------------|---------------------------|---------------------|
| Domicile State : | Type of Category : | Caste Category : SC |
| Sub Caste : Bhangi | Phy. Handicapped : | |
| Caste Certificate No. : | Learning Disability No. : | |

05. Social Reservation (Special Category) Information Section

| | | | | |
|--|--|--|------------------------------------|---|
|  | LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK | | College Code :LMCCSW |  |
| | Jalgaon <i>PO 600 2011 51121</i> | | | |
| For College use only | Course Applied to: CC NGO MGT | | Registration No. 1022865 |  |
| | Admission Date : 06/2/21 | | | |

01. Personal Information Section

| | LAST NAME | FIRST NAME | MIDDLE NAME |
|--------------------------------|-------------------------|---------------------------|------------------|
| Name of the Student | MAHAJAN | SHIVANI | RAJENDRA |
| Father's Name | RAJENDRA | | |
| Mother's Name : | PRAMILA | | |
| Marital Status : | UnMarried | | Saral No. : |
| Date of Birth : 12/08/1998 | | | Gender : Female |
| Place of Birth : ERANDOL | | | Blood Group : O+ |
| Grandfather Name : | Native Place : | | |
| Voter ID Card No. : | Organ Donor : NO | Medium : Marathi | |
| Bank Name : | Account No. : | Transaction Type : ONLINE | |
| Religion : HINDU | Citizenship of : Indian | U-DISE No. : | |
| Aadhar Card No. : 883227994305 | Driving Licence No. : | Minority: NO | |

02. Address Details

| | | | |
|-----------------------------|-----------------------|------------------|-------------------|
| Address for Correspondence: | plot no 5 padmal park | | Pin Code : 425109 |
| State : MAHARASHTRA | District : JALGAON | Tehsil : ERANDOL | City : ERANDOL |
| Permanent Address | plot no 5 padmal park | | Pin Code : 425109 |
| State : MAHARASHTRA | District : JALGAON | Tehsil : ERANDOL | City : ERANDOL |



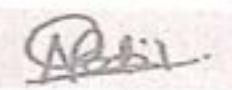
03. Contact Details



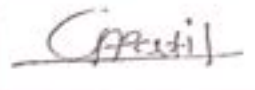
| | |
|--------------------------------|---|
| Student Phone : | Parent Phone : |
| Student Mobile No.: 9307721922 | Student Email Id: mrshivani1998@gmail.com |



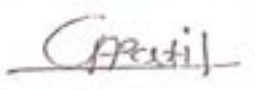
04. Legal Reservation Information Section

| | | |
|------------------------------|---------------------------|----------------------|
| Domicile State : MAHARASHTRA | Type of Category : | Caste Category : OBC |
| Sub Caste : FUL MALI | Phy. Handicapped : | |
| Caste Certificate No. : | Learning Disability No. : | |




05. Social Reservation (Special Category) Information Section



| | | | | |
|---|---|---|-----------------------------|--|
|  | LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK Jalgaon | | College Code :LMCCSW |   |
| | For College use only | Course Applied to: CC NGO MGT Admission Date: 01/02/2021 | Registration No. 1022006 | |
| 01. Personal Information Section | | | | |
| | LAST NAME | FIRST NAME | MIDDLE NAME | |
| Name of the Student | PATIL | ATHARVA | VINAY | |
| Father's Name | VINAY | | | |
| Mother's Name : | VARSHA | | | |
| Marital Status : | UnMarried | Seral No. : | | |
| Date of Birth : | 24/08/2001 | Gender : | Male | |
| Place of Birth : | JALGAON | Blood Group : | A+ | |
| Grandfather Name : | Native Place : | | | |
| Voter ID Card No. : | Organ Donor : | YES | Medium : Marathi | |
| Bank Name : | Account No. : | Transaction Type : ONLINE | | |
| Religion : | HINDU | Citizenship of : | Indian | |
| Aadhar Card No. : | 225288828210 | Driving Licence No. : | Minority: NO | |
| 02. Address Details | | | | |
| Address for Correspondence: | 35, Shastri Nagar, Ramanand Road, Jalgaon 425002 | | | Pin Code : 425002 |
| State : MAHARASHTRA | District : JALGAON | Tehsil : JALGAON | City : JALGAON | |
| Permanent Address | 35, Shastri Nagar, Ramanand Road, Jalgaon 425002 | | | Pin Code : 425002 |
| State : MAHARASHTRA | District : JALGAON | Tehsil : JALGAON | City : JALGAON | |
| 03. Contact Details | | | | |
| Student Phone : | 9422279041 | Parent Phone : | | |
| Student Mobile No.: | 7666682404 | Student Email Id: | patilatharvav@gmail.com | |
| 04. Legal Reservation Information Section | | | | |
| Domicile State : | MAHARASHTRA | Type of Category : | Caste Category : OBC | |
| Sub Caste : | LEVA FATIDAR | Phy. Handicapped : | | |
| Caste Certificate No. : | Learning Disability No. : | | | |
| 05. Social Reservation (Special Category) Information Section | | | | |

| | | | | |
|---|--|--|-----------------------------|--|
|  | LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK Jalgaon | | College Code :LMCCSW |   |
| | For College use only | Course Applied to: CC NGO MGT Admission Date : 2/2/21 | Registration No. 1023991 | |
| 01. Personal Information Section | | | | |
| | LAST NAME | FIRST NAME | MIDDLE NAME | |
| Name of the Student | PATIL | CHAITALI | ASHOK | |
| Father's Name | ASHOK | | | |
| Mother's Name : | VANDANA ASHOK PATIL | | | |
| Marital Status : | UnMarried | Saral No. : | | |
| Date of Birth : | 01/10/1998 | Gender : | Female | |
| Place of Birth : | SAKALI | Blood Group : | B+ | |
| Grandfather Name : | | | Native Place : | |
| Voter ID Card No. : | Organ Donor : NO | | Medium : Marathi | |
| Bank Name : | Account No. : | | Transaction Type : ONLINE | |
| Religion : | HINDU | Citizenship of : | Indian | |
| Aadhar Card No. : | 526181072129 | Driving Licence No. : | Minority: NO | |
| 02. Address Details | | | | |
| Address for Correspondence: | AT POST MOHARALA | | Pin Code : 425301 | |
| State : MAHARASHTRA | District : JALGAON | Tehsil : YAWAL | City : YAWAL | |
| Permanent Address | AT POST MOHARALA | | Pin Code : 425301 | |
| State : MAHARASHTRA | District : JALGAON | Tehsil : YAWAL | City : YAWAL | |
| 03. Contact Details | | | | |
| Student Phone : | Parent Phone : | | | |
| Student Mobile No.: | 7447351109 | Student Email Id: | chaitalipatil219@gmail.com | |
| 04. Legal Reservation Information Section | | | | |
| Domicile State : | MAHARASHTRA | Type of Category : | Caste Category : OBC | |
| Sub Caste : | KUNBI | Phy. Handicapped : | NO | |
| Caste Certificate No. : | | | Learning Disability No. : | |
| 05. Social Reservation (Special Category) Information Section | | | | |

| | | | | |
|---|--|--|-----------------------------|--|
|  | LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK Jalgaon | | College Code :LMCCSW |   |
| | For College use only | Course Applied to: CC NGO MGT Admission Date: 21/2/21 | Registration No. 1023991 | |
| 01. Personal Information Section | | | | |
| | LAST NAME | FIRST NAME | MIDDLE NAME | |
| Name of the Student | PATIL | CHAITALI | ASHOK | |
| Father's Name | ASHOK | | | |
| Mother's Name : | VANDANA ASHOK PATIL | | | |
| Marital Status : | UnMarried | Saral No. : | | |
| Date of Birth : | 01/10/1998 | Gender : | Female | |
| Place of Birth : | SAKALI | Blood Group : | B+ | |
| Grandfather Name : | | Native Place : | | |
| Voter ID Card No. : | | Organ Donor : | NO | Medium : Marathi |
| Bank Name : | | Account No. : | | Transaction Type : ONLINE |
| Religion : | HINDU | Citizenship of : | Indian | U-DISE No. : |
| Aadhar Card No. : | 526181072129 | Driving Licence No. : | | Minority: NO |
| 02. Address Details | | | | |
| Address for Correspondence: | AT POST MOHARALA | | Pin Code : 425301 | |
| State : MAHARASHTRA | District : JALGAON | Tehsil : YAWAL | City : YAWAL | |
| Permanent Address | AT POST MOHARALA | | Pin Code : 425301 | |
| State : MAHARASHTRA | District : JALGAON | Tehsil : YAWAL | City : YAWAL | |
| 03. Contact Details | | | | |
| Student Phone : | | Parent Phone : | | |
| Student Mobile No.: | 7447351109 | Student Email Id: | chaitalipatil219@gmail.com | |
| 04. Legal Reservation Information Section | | | | |
| Domicile State : | MAHARASHTRA | Type of Category : | Caste Category : OBC | |
| Sub Caste : | KUNBI | Phy. Handicapped : | NO | |
| Caste Certificate No. : | | Learning Disability No. : | | |
| 05. Social Reservation (Special Category) Information Section | | | | |

Session 2020-2021

| | | | |
|---|---|-----------------------------|---|
|  | LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK Jalgaon | College Code 1MCCSW |  |
| For College use only | Course Applied to: CC NGO MGT Admission Date 20/10/21 | Registration No. 1022641 |  |
| 01. Personal Information Section | | | |
| | LAST NAME | FIRST NAME | MIDDLE NAME |
| Name of the Student | PATIL | NILIMA | RAVAN |
| Father's Name | PATEL RAVAN BANKAT | | |
| Mother's Name : | PATEL SAVITA RAVAN | | |
| Marital Status : UnMarried | SaraI No. : | | |
| Date of Birth : 30/10/2000 | Gender : Female | | |
| Place of Birth : JUWARDI | Blood Group : O+ | | |
| Grandfather Name : | Native Place : | | |
| Voter ID Card No. : | Organ Donor : YES | Medium : Marathi | |
| Bank Name : SBI | Account No. : 34646116770 | Transaction Type : ONLINE | |
| Religion : HINDU | Citizenship of : Indian | U-DISE No. : | |
| Aadhar Card No. : 514760394321 | Driving Licence No. : | Minority: NO | |
| 02. Address Details | | | |
| Address for Correspondence: | | | Pin Code : 424105 |
| State : MAHARASHTRA | District : JALGAON | Tehsil : BHADGAON | City : MAHINDALE |
| Permanent Address | At Post Mahindale Tal Bhadgaon Dist Jalgaon. | | Pin Code : 424105 |
| State : MAHARASHTRA | District : JALGAON | Tehsil : BHADGAON | City : MAHINDALE |
| 03. Contact Details | | | |
| Student Phone : | Parent Phone : | | |
| Student Mobile No.: 7499174027 | Student Email Id: patilnilima3010@gmail.com | | |
| 04. Legal Reservation Information Section | | | |
| Domicile State : MAHARASHTRA | Type of Category : | Caste Category : OBC | |
| Sub Caste : Kunbi Patil | Phy. Handicapped : | | |
| Caste Certificate No. : | Learning Disability No. : | | |
| 05. Social Reservation (Special Category) Information Section | | | |

| | | | | | |
|--|--|---|------------------------------------|---------------------------|--|
|  | | LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK Jalgaon | | College Code :LHCCSW |  DATE - 01-12-2020 <i>V.N. Rajput</i> |
| | | For College use only Course Applied to: CC NGO MGT Admission Date : | Registration No. 1019608 | | |
| 01. Personal Information Section | | | | | |
| Name of the Student | | LAST NAME | FIRST NAME | MIDDLE NAME | |
| Father's Name | | RAJPUR | VIJAY | NAVALSING | |
| Mother's Name : SANGITA NAVALSING RAJPUR | | NAVALSING KESARSING RAJPUR | | | |
| Marital Status : Unmarried | | Serial No. : | | | |
| Date of Birth : 05/01/1997 | | Gender : Male | | | |
| Place of Birth : ATKAL | | Blood Group : O+ | | | |
| Grandfather Name : | | Native Place : | | | |
| Voter ID Card No. : | | Organ Donor : NO | | Medium : Marathi | |
| Bank Name : STATE BANK OF INDIA | | Account No. : 33164905736 | | Transaction Type : ONLINE | |
| Religion : HINDU | | Citizenship of : Indian | | U-DISE No. : | |
| Aadhar Card No. : 727786333863 | | Driving Licence No. : | | Minority: NO | |
| 02. Address Details | | | | | |
| Address for Correspondence: | | AT POST TALWEL TAL BHUSAWAL | | Pin Code : 425305 | |
| State : MAHARASHTRA | | District : JALGAON | | City : TALWEL | |
| Permanent Address | | AT POST TALWEL TAL BHUSAWAL | | Pin Code : 425305 | |
| State : MAHARASHTRA | | District : JALGAON | | Tehsil : BHUSAWAL | |
| City : TALWEL | | | | | |
| 03. Contact Details | | | | | |
| Student Phone : | | Parent Phone : | | | |
| Student Mobile No.: 7972725233 | | Student Email Id: atulmahajan1@gmail.com | | | |
| 04. Legal Reservation Information Section | | | | | |
| Domicile State : MAHARASHTRA | | Type of Category : | | Caste Category : EWS | |
| Sub Caste : EWS | | Phy. Handicapped : | | | |
| Caste Certificate No. : | | Learning Disability No. : | | | |
| 05. Social Reservation (Special Category) Information Section | | | | | |



**LOKSEVAK MADHUKARRAO CHAUDHARI
COLLEGE OF SOCIAL WORK**

Jalgaon

College Code
:EMCCSW



For College
use only

Course Applied for: CC REGD MGT
Admission Date: 11/11

Registration No.
1022075

Signature

01. Personal Information Section

| | | LAST NAME | FIRST NAME | MIDDLE NAME |
|--------------------------------|--|-------------------------|------------|---------------------------|
| Name of the Student | | SONAWANE | VASISALI | MANJUSHAU |
| Father's Name | | SONAWANE NANA NATHU | | |
| Mother's Name : | | KAMAL | | |
| Marital Status : | | Married | | SaraI No. : |
| Date of Birth : 04/06/1987 | | Gender : Female | | Blood Group : O+ |
| Place of Birth : AMALNER | | Native Place : | | |
| Grandfather Name : | | Organ Donor : NO | | |
| Voter ID Card No. : | | Account No. : | | Medium : Marathi |
| Bank Name : | | Citizenship of : Indian | | Transaction Type : ONLINE |
| Religion : BHUDHIST | | Driving Licence No. : | | |
| Aadhar Card No. : 2183BS471242 | | Minority: NO | | |

02. Address Details

| | | | | |
|-----------------------------|--|---|------------------|-------------------|
| Address for Correspondence: | | ISHWAR COLONY ,NEAR LATHI SCHOOL, JALGAON | | Pin Code : 425001 |
| State : MAHARASHTRA | | District : JALGAON | Tehsil : JALGAON | City : JALGAON |
| Permanent Address | | ISHWAR COLONY ,NEAR LATHI SCHOOL, JALGAON | | Pin Code : 425001 |
| State : MAHARASHTRA | | District : JALGAON | Tehsil : JALGAON | City : JALGAON |

03. Contact Details

| | | | |
|---------------------|------------|-------------------|-----------------------|
| Student Phone : | 7719009889 | Parent Phone : | |
| Student Mobile No.: | 9373192344 | Student Email Id: | vedekush706@gmail.com |

04. Legal Reservation Information Section

| | | | |
|------------------------|-------------|--------------------------|---------------------|
| Domicile State : | MAHARASHTRA | Type of Category : | Caste Category : SC |
| Sub Caste : | MAHAR | Phys. Handicapped : | |
| Caste Certificate No.: | | Learning Disability No.: | |

05. Social Reservation (Special Category) Information Section



LAXMI NARAYAN MADHUKARRAO CHAUDHARI
COLLEGE OF SOCIAL WORK

Jalgaon

College Code
(AMCSW)



Fee Category
and rank

Course System No. : 23/201/2023
Admission Date : 25/01/2024

Registration No.
1024480



01. Personal Information Section

| NAME OF THE STUDENT | LAST NAME | FIRST NAME | MIDDLE NAME |
|---------------------|-----------|------------|-------------|
| TEJVI | TEJVI | NUSVAN | TEJVI |

Father's Name : TEJVI

Mother's Name : RESVA

Serial No. :

Site Status : 10000000

Gender : Female

Date of Birth : 26/06/2005

Blind Group : B+

Place of Birth : JALGAON

Native Place :

Gender Name :

Native Place :

Voter ID Card No. :

Driver Driver : NO

Bank Name :

Account No. :

Religion : HINDU

Ownership of : Land

Author Card No. : 8872150029

Driving License No. :

Ministry: NO

02. Address Details

| Address for Correspondence | Address for Correspondence | Pin Code : 421004 |
|----------------------------|---|-------------------|
| State : GUJARAT | District : MOHANPURA | City : KALVAN |
| Permanent Address | State : GUJARAT NEAR PANDAV NORTI LUNARVAR KALVAN | Pin Code : 421004 |
| State : GUJARAT | District : MOHANPURA | City : KALVAN |



03. Contact Details

| | |
|---------------------------------|--|
| Student Phone : | Parent Phone : |
| Student Mobile No. : 9452770267 | Student Email ID : musan2023@pnu.ac.in |

04. Legal Reservation Information Section

| Domestic State : | Type of Category : | Caste Category : ST |
|-------------------------|---------------------------|---------------------|
| State Code : | Prq. Handicapped : | |
| Caste Certificate No. : | Learning Disability No. : | |

05. Social Reservation (Special Category) Information Section

| | | | | | |
|--|--|---|----------------------|---|--|
|  | | LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK Jalgaon | | College Code :LMCCSW | |
| | | | | Registration No. 1024298 | |
| For College use only | | Course Applied for: CC NGO MGT Admission Date: 2-21/2-1 | |  | |
| 01. Personal Information Section | | | | | |
| Name of the Student | | LAST NAME | FIRST NAME | MIDDLE NAME | |
| WANKHEDE | | WANKHEDE | SANJANA | KISHOR | |
| Father's Name | | KISHOR | | | |
| Mother's Name : VIDYA | | Sural No. : | | | |
| Mtal Status : UnMarried | | Gender : Female | | | |
| Date of Birth : 13/09/2000 | | Blood Group : B+ | | | |
| Place of Birth : JALGAON | | Native Place : | | | |
| Grandfather Name : | | Organ Donor : NO | | Medium : Marathi | |
| Voter ID Card No. : | | Account No. : | | Transaction Type : ONLINE | |
| Bank Name : | | Citizenship of : Indian | | U-DISE No. : | |
| Religion : HINDU | | Driving Licence No. : | | Minority: NO | |
| Aadhar Card No. : 236005414011 | | | | | |
| 02. Address Details | | | | | |
| Address for Correspondence: | | AT POST KHIRODA TAL RAVAR DIST JALGAON | | Pin Code : 425504 | |
| State : MAHARASHTRA | | District : JALGAON | Tehsil : JALGAON | City : RAVAR | |
| Permanent Address | | AT POST KHIRODA TAL RAVAR DIST JALGAON | | Pin Code : 425504 | |
| State : MAHARASHTRA | | District : JALGAON | Tehsil : RAVAR | City : RAVAR | |
| 03. Contact Details | | | | | |
| Student Phone : | | Parent Phone : | | | |
| Student Mobile No. : 9970504913 | | Student Email Id: wankhede-sanjana2@gmail.com | | | |
| 04. Legal Reservation Information Section | | | | | |
| Domicile State : | | Type of Category : | Caste Category : OBC | | |
| Sub Caste : | | Phy. Handicapped : | | | |
| Caste Certificate No. : | | Learning Disability No. : | | | |
| 05. Social Reservation (Special Category) Information Section | | | | | |



**LOKSEVAK MADHUKARRAO
CHAUDHARI COLLEGE OF
SOCIAL WORK, JALGAON**

**Application for
Admission to CC
NGO MGT
Session 2020-2021
Application No. :
2892994**



Applicant's Personal Details

| | | | | |
|---------------------|----------|------------|-------------|---------------|
| Name of the Student | Surname | First name | Father name | Mother's Name |
| | BADGUJAR | RENUKA | DIVANESHWAR | USHA |

| | | | |
|---|-------------|-----------------------------------|--------------|
| Student Name(HINDI) | | Place Of Birth | LASGAON |
| Date of Birth | 28/10/2000 | Birth District | JALGAON |
| Birth State | MAHARASHTRA | Voter Id | |
| Birth Tehsil | Pachora | Blood Group | AB- |
| Marital Status | UNMARRIED | Gender | FEMALE |
| Religion | HINDU | Aadhaar card Number | 313628909203 |
| Nationality | INDIAN | Passport Number | |
| Mother Tongue | MARTHI | Employment Status | Unemployed |
| EID Number | | Eligibility No. | |
| NCC/NSS | NO | Sub Caste | BADGUJAR |
| Caste Category | OBC | PRN Number | |
| Enrollment Number | | Is Orphan | NO |
| Handicap | | Udise No. | |
| Serai No. | | Student has internet connectivity | NO |
| Student has a Desktop/ Laptop/ Smart phone | NO | | |
| Municipal Ward | | | |

| | | | |
|---------------------------|-------------|---------------------|-----------|
| Father's/s/Husband's Name | DIVANESHWAR | Gross Annual Income | 30,000.00 |
| Occupation | FARMER | | |
| Occupation b/c | | | |
| Office Address | | | |

| | | | |
|----------------------|--|-------------|--|
| Current Exam Details | | Roll Number | |
| Section | | | |
| Subject | | | |

| | | | |
|---------------------------|---|-------------------|---------|
| Address of Correspondence | At post lasgaon tq pachora dist jalgaon | | |
| Address | | | |
| State | MAHARASHTRA | District | JALGAON |
| Tehsil | PACHORA | City/Town/Village | LASGAON |
| Pincode | 425115 | | |



LOKSEVAK MADHUKARRAO
CHAUDHARI COLLEGE OF
SOCIAL WORK, JALGAON

Application for
Admission to CC
NGO MGT
Session 2020-2021
Application No. :
2888219



Applicant's Personal Details

| | | | | |
|---------------------|----------|--------------|-------------|---------------|
| Name of the Student | Surname | First name | Father name | Mother's Name |
| | BHALERAO | VISHWAPRABHA | SHARAD | SHUSHMA |

| | | | |
|--|------------|-----------------------------------|---------------|
| Student Name(HINDI) | | Place of Birth | JALGAON |
| Date of Birth | 26/05/1998 | Birth District | Please Select |
| Birth State | | Voter Id | |
| Birth Tehsil | JALGAON | Blood Group | O+ |
| Marital Status | UNMARRIED | Gender | FEMALE |
| Religion | BHUDHIST | Aadhaar card Number | 238631481460 |
| Nationality | INDIAN | Passport Number | |
| Mother Tongue | MARATHI | Employment Status | Unemployed |
| EID Number | | Eligibility No. | |
| NCC/NSS | NO | Sub Caste | |
| Caste Category | SC | PRN Number | |
| Enrollment Number | | Is Orphan | NO |
| Handicap | | Udise No. | |
| Saral No. | | Student has Internet connectivity | NO |
| Student has a Desktop/ Laptop/ Smart phone | NO | | |
| Municipal Ward | | | |

| | | | |
|-------------------------|--------|---------------------|-----------|
| Father's/Husband's Name | SHARAD | Gross Annual Income | 70,000.00 |
| Occupation | | | |
| Jobite | | | |
| Office Address | | | |
| Current Exam Details | | Roll Number | |
| Section | | | |
| Subject | | | |

| | | | |
|---------------------------|-------------|-------------------|---------|
| Address of Correspondence | | | |
| Address | | | |
| State | MAHARASHTRA | District | JALGAON |
| Tehsil | JALGAON | City/Town/Village | JALGAON |
| Pincode | 425001 | | |



LOKSEVAK MADHUKARRAO
CHAUDHARI COLLEGE OF
SOCIAL WORK, JALGAON

Application for
Admission to CC
NGO MGT
Session 2020-2021
Application No. :
2907839



Applicant's Personal Details

| | | | | |
|---------------------|-------------------|----------------------|-----------------------|-------------------------|
| Name of the Student | Surname JAWALE | First name MAHASI | Father name PRAVIN | Mother's Name DIPALI |
|---------------------|-------------------|----------------------|-----------------------|-------------------------|

| | | | |
|---|-------------|-----------------------------------|------------------|
| Student Name(HINDI) | | Place Of Birth | SAVADA |
| Date of Birth | 16/03/2000 | Birth District | JALGAON |
| Birth State | MAHARASHTRA | Voter Id | |
| Birth Tehsil | YAWAL | Blood Group | B+ |
| Marital Status | UNMARRIED | Gender | FEMALE |
| Religion | HINDU | Aadhaar card Number | 896335347205 |
| Nationality | INDIAN | Passport Number | |
| Mother Tongue | MARATHI | Employment Status | Unemployed |
| ETD Number | | Eligibility No. | |
| NCC/NSS | NO | Sub Caste | LEWA PATIDAR |
| Caste Category | OPC | PRN Number | 2017015400005415 |
| Enrollment Number | | Is Orphan | NO |
| Handicap | | Udise No. | |
| Serial No. | | Student has Internet connectivity | NO |
| Student has a Desktop/ Laptop/ Smart phone | NO | | |
| Municipal Ward | | | |

| | | | |
|-------------------------|-----------------------|---------------------|-----------|
| Father's/Husband's Name | PRAVIN BHASKAR JAWALE | Gross Annual Income | 40,000.00 |
| Occupation | | | |
| Jobte | | | |
| Office Address | | | |

| | |
|----------------------|-------------|
| Current Exam Details | |
| Section | Roll Number |
| Subject | |

| | | | |
|---------------------------|-------------|-------------------|---------|
| Address of Correspondence | | | |
| Address | | | |
| AT,POST DD,KATHORA | | | |
| State | MAHARASHTRA | District | JALGAON |
| Tehsil | YAWAL | City/Town/Village | YAWAL |
| Pincode | 425301 | | |



LOKSEVAK MADHUKARRAO
CHAUDHARI COLLEGE OF
SOCIAL WORK, JALGAON

Application for
Admission to CC
NGO MGT
Session 2020-2021
Application No. :
2889636



Applicant's Personal Details

| | | | | |
|---|--------------------------|--------------------------------------|-----------------------|-------------------------|
| Name of the Student | Surname KAROSIVA | First name NEHA | Father name DINESH | Mother's Name SHOBHA |
| Student Name(HINDI) | | | | |
| Date of Birth | 05/03/1999 | Place of Birth | JALGAON | |
| Birth State | Please Select Jalgaon | Birth District | Please Select | |
| Birth Tehsil | Jalgaon | Voter Id | | |
| Marital Status | UNMARRIED | Blood Group | AB+ | |
| Religion | HINDU | Gender | FEMALE | |
| Nationality | INDIAN | Aadhaar card Number | 652574407809 | |
| Mother Tongue | MARTHI | Passport Number | | |
| EID Number | | Employment Status | Unemployed | |
| NCC/NSS | NO | Eligibility No. | | |
| Caste Category | SC | Sub Caste | Bhungal | |
| Enrollment Number | | PRN Number | | |
| Handicap | | Is Orphan | NO | |
| Sarat No. | | Udise No. | | |
| Student has a Desktop/ Laptop/ Smart phone | NO | Student has internet connectivity | NO | |
| Municipal Ward | | | | |

| | | | |
|-------------------------|--------|---------------------|-----------|
| Father's/Husband's Name | DINESH | Gross Annual Income | 25,000.00 |
| Occupation | | | |
| Mobile | | | |
| Office Address | | | |
| Current Exam Details | | | |
| Section | | Roll Number | |
| Subject | | | |

| | | | |
|---------------------------|-------------|-------------------|---------|
| Address of Correspondence | | | |
| Address shani peeth | | | |
| State | MAHARASHTRA | District | JALGAON |
| Tehsil | | City/Town/Village | JALGAON |
| Pincode | 425001 | | |



LOKSEVAK MADHUKARRAO
CHAUDHARI COLLEGE OF
SOCIAL WORK, JALGAON

Application for
Admission to CC
NGO MGT
Session 2020-2021
Application No. :
2889633



Applicant's Personal Details

| Name of the Student | Surname | First name | Father name | Mother's Name |
|---------------------|---------|------------|-------------|---------------|
| | MAHAJAN | SHIVANI | RAJENDRA | PRAMILA |

| | | | |
|--|-------------|-----------------------------------|------------------|
| Student Name(HINDI) | | Place Of Birth | ERANDOL |
| Date of Birth | 12/08/1998 | Birth District | JALGAON |
| Birth State | MAHARASHTRA | Voter Id | |
| Birth Tehsil | Erandol | Blood Group | O+ |
| Marital Status | UNMARRIED | Gender | FEMALE |
| Religion | HINDU | Aadhaar card Number | 883227994305 |
| Nationality | INDIAN | Passport Number | |
| Mother Tongue | MARATHI | Employment Status | Unemployed |
| EID Number | | Eligibility No. | |
| NCC/NSS | NO | Sub Caste | FUL MALL |
| Caste Category | OBC | PRN Number | 2016015400102444 |
| Enrollment Number | | Is Orphan | NO |
| Handicap | | Urise No. | |
| Saral No. | | Student has Internet connectivity | NO |
| Student has a Desktop/ Laptop/ Smart phone | NO | | |
| Municipal Ward | | | |

| | | | |
|-------------------------|----------|---------------------|------------|
| Father's/Husband's Name | RAJENDRA | Gross Annual Income | 250,000.00 |
| Occupation | | | |
| able | | | |
| Office Address | | | |

| | | |
|----------------------|-------------|--|
| Current Exam Details | Roll Number | |
| Section | | |
| Subject | | |

| | | | |
|---------------------------|-------------|-------------------|---------|
| Address of Correspondence | | | |
| Address | | | |
| plot no 5 padmal park | | | |
| State | MAHARASHTRA | District | JALGAON |
| Tehsil | ERANDOL | City/Town/Village | ERANDOL |
| Pincode | 425109 | | |



LOKSEVAK MADHUKARRAO
CHAUDHARI COLLEGE OF
SOCIAL WORK, JALGAON

Application for
Admission to CC
NGO MGT
Session 2020-2021
Application No. :
2892894



(Signature)

Applicant's Personal Details

| Name of the Student | Surname | First name | Father name | Mother's Name |
|---------------------|---------|------------|-------------|---------------|
| | PATIL | ATHARVA | VINAY | VARSHA |

| | | | | |
|---|--------------------|--------------------------------------|------------------|--|
| Student Name(HINDI) | वसुधै किरणं कर्षति | | | |
| Date of Birth | 24/08/2001 | Place Of Birth | JALGAON | |
| Birth State | MAHARASHTRA | Birth District | JALGAON | |
| Birth Tehsil | Jalgaon | Voter Id | | |
| Marital Status | UNMARRIED | Blood Group | A+ | |
| Religion | HINDU | Gender | MALE | |
| Nationality | INDIAN | Aadhaar card Number | 225288828210 | |
| Mother Tongue | MAATHI | Passport Number | | |
| EID Number | | Employment Status | Employed | |
| NCC/NSS | YES | Eligibility No. | | |
| Caste Category | OBC | Sub Caste | LEVA PATIDAR | |
| Enrollment Number | | PRN Number | 2019015400173534 | |
| Handicap | | Is Orphan | NO | |
| Saral No. | | Udise No. | | |
| Student has a Desktop/ Laptop/ Smart phone | NO | Student has Internet connectivity | NO | |
| Municipal Ward | | | | |

| | | | |
|-------------------------|--------------|---------------------|--------------|
| Father's/Husband's Name | VINAY | | |
| Occupation | Librarian | Gross Annual Income | 1,000,000.00 |
| Mobile | | | |
| Office Address | SNOT college | | |
| Current Exam Details | | | |
| Section | | Roll Number | |
| Subject | | | |

Address of Correspondence

| | | | |
|---------|---|-------------------|---------|
| Address | 35, Shastri Nagar, Ramnand Road, Jalgaon 425002 | | |
| State | MAHARASHTRA | District | JALGAON |
| Tehsil | JALGAON | City/Town/Village | JALGAON |
| Pincode | 425002 | | |



LOKSEVAK MADHUKARRAO
CHAUDHARI COLLEGE OF
SOCIAL WORK, JALGAON

Application for
Admission to CC
NGO MGT
Session 2020-2021
Application No. :
2897805



Pratibha

Applicant's Personal Details

| | | | | |
|---|------------------------|--------------------------------------|----------------------|---|
| Name of the Student | Surname PATIL | First name CHATTALI | Father name ASHOK | Mother's Name VANDANA ASHOK PATIL |
| Student Name(HINDI) | श्रीमती शशि कृपा शर्मा | | | |
| Date of Birth | 01/10/1998 | Place Of Birth | SAKALI | |
| Birth State | MAHARASHTRA | Birth District | JALGAON | |
| Birth Tehsil | YAWAL | Voter Id | | |
| Religion | UNMARRIED | Blood Group | B + | |
| Nationality | HINDU | Gender | FEMALE | |
| Mother Tongue | INDIAN | Aadhaar card Number | 526181072129 | |
| EID Number | MARATHI | Passport Number | | |
| NCC/NSS | NO | Employment Status | Unemployed | |
| Caste Category | OBC | Eligibility No. | | |
| Enrollment Number | | Sub Caste | KUNBI | |
| Handicap | NO | PRN Number | 2016015400255281 | |
| Saral No. | NO | Is Orphan | NO | |
| Student has a Desktop/ Laptop/ Smart phone | NO | Udise No. | | |
| Municipal Ward | | Student has internet connectivity | NO | |

| | | | |
|-------------------------|-------------|---------------------|-----------|
| Father's/Husband's Name | ASHOK | Gross Annual Income | 45,000.00 |
| Occupation | FARMER | | |
| able | | | |
| Office Address | | | |
| Current Exam Details | Roll Number | | |
| Section | | | |
| Subject | | | |

| | | | |
|---------------------------|-------------|-------------------|---------|
| Address of Correspondence | | | |
| AT POST MOHARALA | | | |
| Address | MAHARASHTRA | District | JALGAON |
| State | YAWAL | City/Town/Village | YAWAL |
| Tehsil | 425301 | | |
| Pincode | | | |



LOKSEVAK MADHUKARRAO
CHAUDHARI COLLEGE OF
SOCIAL WORK, JALGAON

Application for
Admission to CC
NGO MGT
Session 2020-2021
Application No. :
2892998



Applicant's Personal Details

| | | | | |
|---------------------|---------|------------|-------------|--------------------|
| Name of the Student | Surname | First name | Father name | Mother's Name |
| | PATIL | NILIMA | RAVAN | PATIL SAVITA RAVAN |

| | | | | |
|---|--------------|--------------------------------------|------------------|--|
| Student Name(HINDI) | एनित रवण रवण | | | |
| Date of Birth | 30/10/2000 | Place Of Birth | JUWARDI | |
| Birth State | MAHARASHTRA | Birth District | JALGAON | |
| Birth Tehsil | Bhadrapur | Voter Id | O+ | |
| Marital Status | UNMARRIED | Blood Group | | |
| Religion | HINDU | Gender | FEMALE | |
| Nationality | INDIAN | Aadhaar card Number | 514760394321 | |
| Mother Tongue | MARATHI | Passport Number | | |
| EID Number | | Employment Status | Employed | |
| NCC/NSS | NO | Eligibility No. | | |
| Caste Category | OBC | Sub Caste | Kunbi Patil | |
| Enrollment Number | | PRN Number | 2019015400173717 | |
| Handicap | | Is Orphan | NO | |
| Saral No. | | Udise No. | | |
| Student has a Desktop/ Laptop/ Smart phone | NO | Student has Internet connectivity | NO | |
| Municipal Ward | | | | |

| | | | |
|-------------------------|--------------------|---------------------|-----------|
| Father's/Husband's Name | PATIL RAVAN BANKAT | Gross Annual Income | 30,000.00 |
| Occupation | Father Is date | | |
| ohite | | | |
| Office Address | | | |

| | |
|----------------------|-------------|
| Current Exam Details | |
| Section | Roll Number |
| Subject | |

| | | | |
|---------------------------|-------------|-------------------|-----------|
| Address of Correspondence | | | |
| Address | | | |
| State | MAHARASHTRA | District | JALGAON |
| Tehsil | BHADGAON | City/Town/Village | MAHINDALE |
| Pincode | 424105 | | |



LOKSEVAK MADHUKARRAO
CHAUDHARI COLLEGE OF
SOCIAL WORK, JALGAON

Application for
Admission to CC
NGO MGT
Session 2020-2021
Application No. :
2903666



DATE - 01-12-2020

U.N. Patil

Applicant's Personal Details

| Name of the Student | Surname | First name | Father name | Mother's Name |
|---------------------|---------|------------|-------------|-----------------------------|
| | RAJPUT | VIJAY | NAVALSING | SANGITA NAVALSING RAJPUT |

| | | | | |
|---|-------------------|--------------------------------------|--------------|--|
| Student Name(HINDI) | Rajay vijay traya | | | |
| Date of Birth | 05/01/1997 | Place Of Birth | ATKAL | |
| Birth State | MAHARASHTRA | Birth District | BULDHANA | |
| Birth Tehsil | BULDHANA | Voter Id | | |
| Marital Status | UNMARRIED | Blood Group | O+ | |
| Religion | HINDU | Gender | MALE | |
| Nationality | INDIAN | Aadhaar card Number | 727786333863 | |
| Mother Tongue | MARATHI | Passport Number | | |
| EID Number | | Employment Status | Unemployed | |
| NCC/NSS | YES | Eligibility No. | | |
| Caste Category | EWS | Sub Caste | EWS | |
| Enrollment Number | | PRN Number | | |
| Handicap | | Is Orphan | NO | |
| Serial No. | | Utilise No. | | |
| Student has a Desktop/ Laptop/ Smart phone | NO | Student has internet connectivity | NO | |
| Municipal Ward | | | | |

| | | | |
|--------------------------|-----------------------------|---------------------|-----------|
| Father's /Husband's Name | NAVALSING KESARISING RAJPUT | Gross Annual Income | 30,000.00 |
| Occupation | Father is date | | |
| Mobile | | | |
| Office Address | | | |
| Current Exam Details | Roll Number | | |
| Section | | | |
| Subject | | | |

| | | | |
|-----------------------------|-------------|-------------------|---------|
| Address of Correspondence | | | |
| AT POST TALWEL TAL BHUSAVAL | | | |
| Address | | | |
| State | MAHARASHTRA | District | JALGAON |
| Tehsil | BHUSAVAL | City/Town/Village | TALWEL |
| Pincode | 425305 | | |



LOKSEVAK MADHUKARRAO
CHAUDHARI COLLEGE OF
SOCIAL WORK, JALGAON

Application for
Admission to CC
NGO MGT
Session 2020-2021
Application No. :
2896536



Applicant's Personal Details

| | | | | |
|---------------------|----------|------------|-------------|---------------|
| Name of the Student | Surname | First name | Father name | Mother's Name |
| | SONAWANE | VAISHALI | NANABHAU | KAMAL |

| | | | | |
|--|--------------------------|-----------------------------------|-------------------|---------|
| Student Name(HINDI) | श्रीवाणी गणपतिराव शिवाजी | | Place Of Birth | AMALNER |
| Date of Birth | 04/06/1987 | Birth District | JALGAON | |
| Birth State | MAHARASHTRA | Voter Id | O+ | |
| Birth Tehsil | AMALNER | Blood Group | FEMALE | |
| Marital Status | MARRIED | Aadhaar card Number | 218385471242 | |
| Religion | BHUDDHIST | Gender | Unemployed | |
| Nationality | INDIAN | Passport Number | | |
| Mother Tongue | MARATHI | Employment Status | | |
| EID Number | NO | Eligibility No. | | |
| NCC/NSS | NO | Sub Caste | MAHAR | |
| Caste Category | SC | PRN Number | 20190154400173965 | |
| Enrollment Number | | Is Orphan | NO | |
| Handicap | | Udisee No. | | |
| Sarat No. | | Student has Internet connectivity | NO | |
| Student has a Desktop/ Laptop/ Smart phone | NO | | | |
| Municipal Ward | | | | |

| | | | |
|-------------------------|----------------------|---------------------|-----------|
| Father's/Husband's Name | SONAWANE NANU NATTHU | Gross Annual Income | 70,000.00 |
| Occupation | RETIRED | | |
| Mobile | | | |
| Office Address | | | |

| | |
|----------------------|-------------|
| Current Exam Details | Roll Number |
| Section | |
| Subject | |

| | | | |
|---------------------------|---|-------------------|---------|
| Address of Correspondence | ISHWAR COLONY ,NEAR LATHI SCHOOL, JALGAON | | |
| Address | | | |
| State | MAHARASHTRA | District | JALGAON |
| Tehsil | JALGAON | City/Town/Village | JALGAON |
| Pincode | 425001 | | |



LOKSEVAK MADHUKARRAO
CHAUDHARI COLLEGE OF
SOCIAL WORK, JALGAON

Application for
Admission to CC
NGO MGT
Session 2020-2021
Application No. :
2915510



Applicant's Personal Details

| | | | | |
|---------------------|------------------|----------------------|------------------------|------------------------|
| Name of the Student | Surname TADVI | First name MUSKAN | Father name IBRAHIM | Mother's Name BEENA |
|---------------------|------------------|----------------------|------------------------|------------------------|

| | | | |
|--|--------------------------|-----------------------------------|--------------|
| Student Name(HINDI) | | Place Of Birth JALGAON | JALGAON |
| Date of Birth | 24/04/2000 | Birth District | JALGAON |
| Birth State | Please Select JALGAON | Voter Id | |
| Birth Tehsil | UNMARRIED | Blood Group | B+ |
| Marital Status | TADVI BHIL | Gender | FEMALE |
| Religion | INDIAN | Aadhaar card Number | 688721539058 |
| Nationality | MARATHI | Passport Number | |
| Mother Tongue | | Employment Status | Unemployed |
| EID Number | NO | Eligibility No. | |
| NCC/NSS | NO | Sub Caste | |
| Caste Category | ST | PRN Number | |
| Enrollment Number | | Is Orphan | NO |
| Handicap | | Udise No. | |
| Saral No. | | Student has internet connectivity | NO |
| Student has a Desktop/ Laptop/ Smart phone | NO | | |
| Municipal Ward | | | |

| | | | |
|-------------------------|---------|---------------------|-----------|
| Father's/Husband's Name | IBRAHIM | Gross Annual Income | 50,000.00 |
| Occupation | | | |
| Office Address | | | |
| Current Exam Details | | Roll Number | |
| Section | | | |
| Subject | | | |

| | | | |
|---------------------------|---|-------------------|-------------|
| Address of Correspondence | SAI BABA APPTN,ENT NEAR POONAM HOTEL ULLHASNAGR KLYAN | | |
| Address | | | |
| State | MAHARASHTRA | District | MUMBAI-CITY |
| Tehsil | KALYAN | City/Town/Village | KALYAN |
| Pincode | 421004 | | |



LOKSEVAK MADHUKARRAO
CHAUDHARI COLLEGE OF
SOCIAL WORK, JALGAON

Application for
Admission to CC
NGO MGT
Session 2020-2021
Application No. :
2910598



Applicant's Personal Details

| | | | | |
|---------------------|----------|------------|-------------|---------------|
| Name of the Student | Surname | First name | Father name | Mother's Name |
| | WANKHEDE | SANJANA | KISHOR | VIDYA |

| | | | |
|--|---------------|-----------------------------------|---------------|
| Student Name(HINDI) | | Place Of Birth | JALGAON |
| Date of Birth | 13/09/2000 | Birth District | Please Select |
| Birth State | Please Select | Voter Id | |
| Birth Tehsil | JALGAON | Blood Group | B+ |
| Marital Status | UNMARRIED | Gender | FEMALE |
| Religion | HINDU | Aadhaar card Number | 236005414011 |
| Nationality | INDIAN | Passport Number | |
| Mother Tongue | HINDU | Employment Status | Unemployed |
| EID Number | | Eligibility No. | |
| NCC/NSS | NO | Sub Caste | |
| Caste Category | OBC | PRN Number | |
| Enrollment Number | | Is Orphan | NO |
| Handicap | | Udise No. | |
| Saral No. | | Student has Internet connectivity | NO |
| Student has a Desktop/ Laptop/ Smart phone | NO | | |
| Municipal Ward | | | |

| | | | |
|--------------------------|--------|---------------------|-----------|
| Father's /Husband's Name | KISHOR | Gross Annual Income | 65,000.00 |
| Occupation | | | |
| Shife | | | |
| Office Address | | | |

| | |
|----------------------|-------------|
| Current Exam Details | |
| Section | Roll Number |
| Subject | |

| | | | |
|---|-------------|-------------------|---------|
| Address of Correspondence | | | |
| Address | | | |
| AT POST KHIRODA, TAL RAVER DIST JALGAON | | | |
| State | MAHARASHTRA | District | JALGAON |
| Tehsil | JALGAON | City/Town/Village | RAVER |
| Pincode | 425504 | | |

Annexure-A

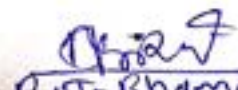
List of admitted students for Career Oriented Courses under Ordinance 181

- | | |
|-----------------------------------|--|
| 1) Name of the College | - Dhanaji Nana Chaudhari Vidya Prabodhini's Loksevak Madhukarrao Chaudhari College of Social Work , Jalgaon |
| 2) Name of Career oriented Course | - Certificate Course in N.G.O. Management |
| 3) Acedamic Year | - 2021- 2022 |
| 4) Intake Capacity | - 60 |

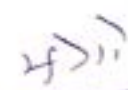
| Sr. No. | Full name of the Students | Gender | Category | Educational Qualification # | Year of passing Cert./Diploma Course (Applicable only for Diploma & Adv. Diploma Course) | Presently admitted Class (F.Y.,S.Y.,T.Y./P.G. | Remark (If Any) |
|---------|---------------------------|--------|----------|-----------------------------|--|--|------------------|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| 1 | GAVIT KAPIL RAJARAM | MALE | ST | | | MSWSY | |
| 2 | JADHAV TEJASWITA MUKUND | FEMALE | OBC | | | MSWSY | |
| 3 | JAGTAP SARITA VINOD | FEMALE | ST | | | MSWSY | |
| 4 | KOSHTI JAYESH KALPANARAJU | MALE | SBC | | | MSWSY | |
| 5 | KUMAVAT NAYANA ANIL | FEMALE | NT-B | | | MSWSY | |
| 6 | MAHAJAN BHUSHAN DEVENDRA | MALE | OBC | | | MSWSY | |
| 7 | PATIL KALPESH SOMNATH | MALE | OBC | | | MSWSY | |
| 8 | RATHOD NITIN DEVCHAND | MALE | VJ | | | MSWSY | |
| 9 | RATHOD SHRIRAM BHIMSING | MALE | VJ | | | MSWSY | |
| 10 | TAYADE SWATI ANIL | FEMALE | SC | | | MSWSY | |

CERTIFICATE

This is to certify that the documents regarding educational qualifications of the above students have been verified and found correct. The students mentioned in the list are eligible for the admission to the above mentioned course as per university ordinance-181.


B.T. Bhamate
 Co-ordinator
 Mobile No. - 8669109105




ACTING PRINCIPAL
 Loksevak Madhukarrao Chaudhari
 College of Social Work, Jalgaon

Annexure-A


List of admitted students for Career Oriented Courses under Ordinance 181

- 1) Name of the College - Dhanaji Nana Chaudhari Vidya Prabodhini's
Loksevak Madhukarrao Chaudhari College of Social Work , Jalgaon
- 2) Name of Career oriented Course - Certificate Course in N.G.O. Management
- 3) Acedamic Year - 2021- 2022
- 4) Intake Capacity - 60

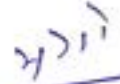
| Sr. No. | Full name of the Students | Gender | Category | Educational Qualification # | Year of passing. Cert./Diploma Course (Applicable only for Diploma & Adv. Diploma Course) | Presently admitted Class (F.Y.,S.Y.,T. Y./P.G. | Remark (If Any) |
|---------|---------------------------|--------|----------|-----------------------------|---|---|------------------|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| 1 | GAVIT KAPIL RAJARAM | MALE | ST | | | MSWSY | |
| 2 | JADHAV TEJASWITA MUKUND | FEMALE | OBC | | | MSWSY | |
| 3 | JAGTAP SARITA VINOD | FEMALE | ST | | | MSWSY | |
| 4 | KOSHTI JAYESH KALPANARAJU | MALE | SBC | | | MSWSY | |
| 5 | MAHAJAN BHUSHAN DEVENDRA | MALE | OBC | | | MSWSY | |
| 6 | PATIL KALPESH SOMNATH | MALE | OBC | | | MSWSY | |
| 7 | RATHOD NITIN DEVCHAND | MALE | VJ | | | MSWSY | |
| 8 | RATHOD SHRIRAM BHIMSING | MALE | VJ | | | MSWSY | |

CERIFICATE

This is to certify that the documents regarding educational qualifications of the above students have been verified and found correct. The students mentioned in the list are eligible for the admission to the above mentioned course as per university ordinance-181.


Co-ordinator
Mobile No. - 8669179105
B- S Bhamataraiput




ACTING PRINCIPAL
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - MSW-11 ^{NGO} |
|------------|-----------------|------------------|-----------|--|
| C10/198 | 22/11/2021 | RS:1200/- | | Roll No. Reg. No. Year 2021-22 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in N.G.O. management

..... for the Session 2021-2022

The necessary information for the admission is given below

- 1 Name in full - G. Gavit Kabil Rajaram
(In Block Letters) Surname Name Middle Name
2. Mother Name Hirabai Rajaram Gavit
3. Father Name Rajaram manglu Gavit
4. Date of Birth 07/11/1997
5. Caste : SC/ST/NT/SBC/OBC/OPEN ST
6. Medium : Marathi / English marathi
7. Present class MSW - II
8. Permanent Address At sabarsonda post bodgaon Tal sukri chule
(With Phone / Cell No.) 9168991571

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - HGO |
|------------|-----------------|------------------|-----------|--------------------------------------|
| C10/192 | 18/11/2021 | RS.500/- | | Roll No. Reg. No. Year 2021-22 |

Remarks of the Selection Committee The candidate named above is fit not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in N.G.O. Management
..... for the Session 2011-2012

The necessary information for the admission is given below

- 1 Name in full - TADHAV Surname TEJASWITA Middle Name MUKUND
(In Block Letters)
2. Mother Name NAJINA
3. Father Name MUKUND
4. Date of Birth 12/08/1997
5. Caste : SC/ST/NT/SBC/OB/OPEN O.B.C.
6. Medium : Marathi / English English
7. Present class M.S.W. 1st year.
8. Permanent Address NANDGAON Post NANDRA(84) Tal+Dist-JALGAON
(With Phone / Cell No.) 9765751065

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - N.G.O. Roll No. Reg. No. Year 2021-22 |
|------------|-----------------|------------------|-----------|--|
| C10/199 | 22/11/2021 | RS. 1200/- | | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon

Respected Sir,

I requested for the admission to Certificate Course in N.G.O. mana

management for the Session 2021-2022

The necessary information for the admission is given below

1 Name in full - Jagtap sarita vinod
(In Block Letters) Surname Name Middle Name

2. Mother Name Lilabai vinod Jagtap

3. Father Name vinod Tukaram Jagtap

4. Date of Birth _____

5. Caste : SC/ST/NT/SBC/OBC/OPEN ST

6. Medium : Marathi / English marathi

7. Present class MSW - II

8. Permanent Address At vasdhare post bhone tel Nandurbar-dist

(With Phone / Cell No.) 9307415254 (8010688223 Nandurbar)

Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - |
|------------|-----------------|------------------|-----------|--------------|
| 210/1929 | 18/11/2021 | RS. 500/- | | NGO |
| | | | | Roll No. |
| | | | | Reg. No. |
| | | | | Year 2021-22 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principa

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in N.G.O. Management

for the Session 201 -201

The necessary information for the admission is given below

- 1 Name in full - KOSHTI JAYESH KALPNA RAJU
(In Block Letters) Surname Name Middle Name
 2. Mother Name KALPANA
 3. Father Name RAJU
 4. Date of Birth 05/06/1996
 5. Caste : SC/ST/NT/SBC/OBC/OPEN S.B.C.
 6. Medium : Marathi / English MARATHI
 7. Present class M.S.W IInd year.
 8. Permanent Address Virsavarkar Nagar JALGAON.
- (With Phone / Cell No.) 898380881

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - <u>NGO Management</u> |
|---------------|-----------------|------------------|-----------|-------------------------------|
| <u>Online</u> | <u>15-12-21</u> | <u>1200</u> | | Roll No. <u>42</u> |
| | | | | Reg. No. |
| | | | | Year - <u>2021-22</u> |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in N.G.O Management

----- for the Session 201 -201

The necessary information for the admission is given below

- 1 Name in full - Kumavat Nayana Anil
(In Block Letters) Surname Name Middle Name
2. Mother Name KUMAVAT SUREKHA ANIL
3. Father Name KUMAVAT ANIL GOVINDA
4. Date of Birth 09/03/1999
5. Caste : SC/ST/NT/SBC/OBC/OPEN NT (CB)
6. Medium : Marathi / English MARATHI
7. Present class MSW-IInd
8. Permanent Address A1: post: MEHUNBARE TAL CHALISSGAN, Dist Jalgaon
(With Phone / Cell No.) 9767826348 / 8308088001 nayanakumavatta@gmail.com

Nayana
Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - NGO |
|------------|-----------------|------------------|-----------|--------------------------------------|
| C10/201 | 23/11/2021 | Rs 600/- | | Roll No. Reg. No. Year 2021-22 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in N.G.O. Management

for the Session 2021-2022

The necessary information for the admission is given below

1 Name in full - MAHAJAN BHUSHAN DEVENDRA
(In Block Letters) Surname Name Middle Name

2. Mother Name Sunita Devendra Mali

3. Father Name Devendra Dharmma mali

4. Date of Birth 04/03/1998

5. Caste : SC/ST/NT/SBC/OPEN OBC

6. Medium : Marathi / English Marathi

7. Present class _____

8. Permanent Address All Post. Wade, Tel. Bhadgon, Dist Jalgaon.

(With Phone / Cell No.) 9657918834

Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Roll No. Reg. No. Year |
|-------------------|-----------------|------------------|-----------|---|
| online Payment | 16-11-21 | 500 | | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
 The Principal
 Loksevak Madhukarrao Chaudhari
 College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in N.G.O

Management for the Session 201 -201

The necessary information for the admission is given below

1 Name in full - PATIL KALPESH SOMNATH
 (In Block Letters) Surname Name Middle Name

2. Mother Name SUREKHA

3. Father Name PATIL SOMNATH DATTATRAY

4. Date of Birth 10-09-1993

5. Caste : SC/ST/NT/SBC/OBC/OPEN OBC

6. Medium : Marathi / English MARATHI

7. Present class MSW - IInd year

8. Permanent Address PL. YOGESHWAR NAGAR, OLD KHEDE ROAD, Jalgaon.

(With Phone / Cell No.) 9011911779

K.S. Patil
 Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - N.G.O |
|------------|-----------------|------------------|-----------|--------------------------------------|
| Online | 18-11-21 | 50 | | Roll No. Reg. No. Year 2021-22 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in N.G.O MANAGEMENT

..... for the Session 201 -201

The necessary information for the admission is given below

1. Name in full - RATHOD NITIN DEVCHAND
(In Block Letters) Surname Name Middle Name
2. Mother Name SUMAN
3. Father Name DEVCHAND
4. Date of Birth 20/11/1998
5. Caste : SC/ST/NT/SBC/OBC/OPEN VJNT
6. Medium : Marathi / English MARATHI
7. Present class MSW - IInd
8. Permanent Address At. Po. MALKHEDA, TEL - JAMNER DIST - JALGAON
(With Phone / Cell No.) 9518992168

Rathod .
Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

original bonafide
HRM तामाटे

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- ✓ 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - N.G.O |
|------------|-----------------|------------------|-----------|---------------|
| online | 23-11-21 | 500 | | Roll No. |
| | | | | Reg. No. |
| | | | | Year 2021-22 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in N.G.O. Management

for the Session 2021-2022

The necessary information for the admission is given below

- 1 Name in full - RATHOD - SHRIRAM BHIMSING
(In Block Letters) Surname Name Middle Name
2. Mother Name - Shobha
3. Father Name - Bhimsing - Sagare Rathod.
4. Date of Birth - 30/12/1997
5. Caste : SC/ST/NT/SBC/OBC/OPEN - NT
6. Medium : Marathi / English - Marathi
7. Present class - _____
8. Permanent Address - At/post . Talegaon Tanda . Tel. Chalisgaon
(With Phone / Cell No.) Dist. Jalgaon .

8459104071

Signature of the Applicant

Rathod



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class |
|------------|-----------------|------------------|-------------|-------|
| 06/225 | 21/1/2022 | ₹-1200 | [Signature] | 100 |

Remarks of the Selection Committee The candidate named above is/is not recommended for admission

Admission Clerk

Co-ordinator

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in N.G.O. M

Management for the Session 2021-2022.

The necessary information for the admission is given below

1. Name in full - TAYADE SWATI ANIL
(In Block Letters) Surname Name Middle Name
2. Mother Name TAYADE USHA ANIL
3. Father Name TAYADE ANIL CHANDRAN
4. Date of Birth 22nd May 1995
5. Caste : SC/ST/NT/SBC/OBC/OPEN SC
6. Medium : Marathi / English Marathi
7. Present class 2nd Year MSW
8. Permanent Address Police line Double U Building, Jalgaon.
(With Phone / Cell No.) 7499255375

Signature of the Applicant

Annexure-A

List of admitted students for Career Oriented Courses under Ordinance 181

- 1) Name of the College
- 2) Name of Career oriented Course
- 3) Academic Year
- 4) Intake Capacity

Dhanaji Nana Chaudhari Vidya Prabodhini's
Loksevak Madhukarrao Chaudhari College of
Certificate Course in N.G.O. Management
2022-2023
60



| Sr. No. | Full name of the Students | Gender | Category | Educational Qualification # | Year of passing, Cert./Diploma Course (Applicable only for Diploma & Adv. Diploma Course) | Presently admitted Class (F.Y.,S.Y.,T. Y./P.G. | Remark (If Any) |
|---------|------------------------------|--------|----------|-----------------------------|---|---|------------------|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| 1 | BHARUDE MANISHA GHANSHAM | FEMALE | SC | XII | - | MSWSY | |
| 2 | BHOYE RAHUL RAMBHAU | MALE | ST | XII | | BSWFY | |
| 3 | GAVALI MADHURI KHANDU | FEMALE | ST | XII | | BSWTY | |
| 4 | HADE ANIL DNYANESHWAR | MALE | OPEN | XII | | MSWFY | |
| 5 | INGALE ALKA VISHNU | FEMALE | SBC | XII | | MSWFY | |
| 6 | KHONDE ROHIT SUKIAL | MALE | OBC | XII | | MSWSY | |
| 7 | KOLI BHAGYASHRI GAJANAN | FEMALE | SBC | XII | | BSWTY | |
| 8 | KOLI SAPANA BALU | FEMALE | SBC | XII | | BSWTY | |
| 9 | KOSODE SAKSHI SANTOSH | FEMALE | SC | XII | | MSWFY | |
| 10 | LAHASE SUSHIL VASANT | MALE | SC | XII | | BSWTY | |
| 11 | MAULE ARCHANA HARIDAS | FEMALE | ST | XII | | BSWTY | |
| 12 | MEHERE APURVA SANJAY | FEMALE | SC | XII | | BSWFY | |
| 13 | MORE LALKRUSHNA DURGADAS | MALE | ST | XII | | MSWSY | |
| 14 | PANPATIL ROHAN MANOHAR | MALE | SC | XII | | MSWFY | |
| 15 | PAJIL DARSHAN RAVINDRA | MALE | OBC | XII | | MSWFY | |
| 16 | PAWAR PRASAD BALASAHEB | MALE | OBC | XII | | MSWFY | |
| 17 | PAWAR UMESH HARCHAND | MALE | NT-A | XII | | BSWTY | |
| 18 | SALUNKHE DIPALI PANDHARINATH | FEMALE | OBC | XII | | BSWFY | |
| 19 | VALVI INDRASING RAYSING | MALE | ST | XII | | MSWSY | |

CERTIFICATE

This is to certify that the documents regarding educational qualifications of the above students have been verified and found correct. The students mentioned in the list are eligible for the admission to the above mentioned course as per university ordinance-181.

Co-ordinator

Mobile No. -

Dr. RAKESH P. CHAUDHARI
PRINCIPAL

Loksevak Madhukarrao Chaudhari
College of Social Work, Jaigaon



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - H/O Roll No. Reg. No. Year |
|------------|-----------------|------------------|-----------|---|
| 985 | 23/11/22 | 1200/- | | 2022-23 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to **Certificate Course in N.G.O. Management**

..... for the Session 2022-2023

The necessary information for the admission is given below

1. Name in full - **BARUDE MANISHA GHANASHAM**
(In Block Letters) Surname Name Middle Name
2. Mother Name **NARMADARATI**
3. Father Name **GHANASHAM**
4. Date of Birth **23.10.1995**
5. Caste : **SC/ST/NT/SBC/OBC/OPEN** **SC**
6. Medium : **Marathi / English**
7. Present class **MSW - II year**
8. Permanent Address **At post. Amode. Tal. Vadod**
(With Phone / Cell No.) **932540010, 9588648544**

Signature of the Applicant



LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF
SOCIAL WORK
Jalgaon

College Code:
LMCCSW

Application No.:
2



For College use
only

Course Applied for: CC NGO MGT
Medium: MARATHI

Registration No.
2211862

Registration Date: 18/10/2022

1. Personal information section

| Name of Student | Last Name | First Name | Middle Name |
|--|--------------------------------------|--------------------------|------------------|
| BHOYE | BHOYE | RAHUL | RAMBHAU |
| Father's Name | | | |
| Mother's Name: KALPANA | | | |
| Marital Status: UNMARRIED | | In-House Student: NO | |
| Date of Birth: 08/07/2003 | | Saral No.: | |
| Place of Birth: DABHADI | | Gender: MALE | |
| Grandfather's Name: | | Blood Group: O+ | |
| Voter ID card No.: | | Native Place: | |
| Bank Name: | | Organ Donor: NO | |
| Religion: HINDU | Account No.: | Transaction Type: ONLINE | |
| Aadhaar card No.: 233420263825 | Nationality: INDIAN | UIDISE No. | |
| 2. Address Details | Driving Licence No.: | Eligibility No.: | |
| Address of Correspondence: | AT DABHADI, TAL.PETH, DIS.NASHIK | | |
| State: MAHARASHTRA | District: NASHIK | Tehsil: PETH | Pin Code: 422208 |
| Permanent Address: | AT DABHADI, TAL.PETH, DIS.NASHIK | | |
| State: MAHARASHTRA | District: NASHIK | Tehsil: PETH | Pin Code: 422208 |
| 3. Contact Details | | | |
| Student Mobile No.: 8446352834 | | | |
| Student Email Id: RBHOYE185@GMAIL.COM | Alternate Contact Number: 8446352834 | | |
| 4. Legal Reservation Information Section | Parent phone: 8010352834 | | |
| Domicile state: | Admission Category: ST | | |
| Caste: KONVA | | Caste Category: ST | |
| Caste Certificate No.: | Phys. Handicapped: | | |
| 5. Social Reservation (Special Category) Information Section | Learning Disability No.: | | |
| SR No. | SOCIAL RESERVATION NAME | | |

APPLICATION FORM

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - <u>H60</u> | Roll No. <u>8</u> | Reg. No. | Year <u>2022-23</u> |
|------------|-----------------|------------------|--------------------|--------------------|-------------------|----------|---------------------|
| <u>269</u> | <u>14/11/22</u> | <u>600</u> | <u>[Signature]</u> | | | | |

Remarks of the Selection Committee: The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in N.G.O

Management for the Session 2022, 2023

The necessary information for the admission is given below

- 1. Name in full - GAVALI MADHURI KHANDE
(In Block Letters) Surname Name Middle Name
- 2. Mother Name Seelabai Khandu Gavale
- 3. Father Name Khandu Harji Gavale
- 4. Date of Birth 26/03/2002
- 5. Caste : SC/ST/NT/SBC/OBC/OPEN ST
- 6. Medium : Marathi / English Marathi
- 7. Present class 8th year
- 8. Permanent Address M. Gundharpada post. Babali ta. Surgand dist. Nashik
(With Phone / Cell No.) 9284669511

Signature of the Applicant [Signature]



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Roll No. Reg. No. Year |
|------------|-----------------|------------------|-----------|---|
| C10/DC/261 | 11/11/2022 | Rs.600/- | | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,

Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in N.G.O Management

for the Session 20 - 20

The necessary information for the admission is given below

1. Name in full - HADE ANIL DNYANESHWAR
(In Block Letters) Surname Name Middle Name
2. Mother Name LAXMI BAI DNYANESHWAR HADE
3. Father Name DNYANESHWAR PAKHMARI HADE
4. Date of Birth 20/03/1992
5. Caste : SC/ST/NT/SBC/OBC/OPEN OPEN
6. Medium : Marathi / English Marathi
7. Present class MSW - I class
8. Permanent Address AT: PALASHI POST: BANOTI TEL: SOYEGAN DEST AUFANGUL
(With Phone / Cell No.) 9673774060

Anil Hade
Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - <i>MSW</i> | Roll No. | Reg. No. | Year - <i>2023</i> |
|------------|-----------------|------------------|--------------------|--------------------|----------|----------|--------------------|
| <i>103</i> | <i>19/11/22</i> | <i>₹ 1000</i> | <i>[Signature]</i> | | | | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,

~~Principal~~
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in N.G.O.

Management for the Session 2022-2023

The necessary information for the admission is given below

1 Name in full - INBALE ALENA WISHNU
(In Block Letters) Surname Name Middle Name

2. Mother Name KAMAL

3. Father Name WISHNU

4. Date of Birth 1-11-84

5. Caste : SC/ST/NT/SBC/OBC/OPEN SBC

6. Medium : Marathi / English Marathi

7. Present class MSW - Ist year

8. Permanent Address Ganesh Chokry, Asha Road, Jalgaon

(With Phone / Cell No.) 9422564545

Signature of the Applicant

[Signature]



DEPARTMENT OF HUMAN RESOURCE DEVELOPMENT, MARATHI
 Loksevak Madhukarrao Chaudhari
 Accredited M' Grade Institute by the M.A.C

Application Form

For the Admission of Certificate Course in
 1) Certificate Course in Human Resource management
 2) Certificate Course in N.C.O. Management
 3) Certificate Course in Child Counselling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - <i>MSW-IInd</i> Roll No. <i>21</i> Reg. No. Year- <i>2022-2023</i> |
|------------|-----------------|------------------|--------------------|--|
| <i>104</i> | <i>19/11/22</i> | <i>600</i> | <i>[Signature]</i> | |

Remarks of the Selection Committee: The candidate named above is/is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
 The Principal
 Loksevak Madhukarrao Chaudhari
 College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in N.C.O. Management

for the Session 2022-2023

The necessary information for the admission is given below

- 1. Name in full - Khade Rohit Suktal
(In Block Letters) Surname Name Middle Name
- 2. Mother Name Khade Kokila Suktal
- 3. Father Name Khade Suktal Devrao
- 4. Date of Birth 03/09/2000
- 5. Caste : SC/ST/NT/SBC/OBC/OPEN OBC
- 6. Medium : Marathi / English Marathi
- 7. Present class MSW- Ist
- 8. Permanent Address Road No: 36/A, Plot No 7, Gopaldpura Police Colony, Awarshi, Jalgaon
(With Phone / Cell No.) 9373773159

[Signature]
 Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.C.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - <u>Bsw III</u> Roll No. <u>20</u> Reg. No. Year - 2022-23 |
|------------------|-------------------|------------------|-----------|--|
| <u>CR/20/288</u> | <u>21/11/2022</u> | <u>Rs 600/-</u> | | |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

NGO

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon

Respected Sir,

I requested for the admission to Certificate Course in N.C.O.



Management for the Session 20 - 20

The necessary information for the admission is given below

1. Name in full - KELI Surname BHAGYASHRI GAJANAN
(In Block Letters)
2. Mother Name Asha Gajanan Keli
3. Father Name Gajanan Keli
4. Date of Birth 04/05/2002
5. Caste : SC/ST/NT/SBC/OBC/OPEN SBC
6. Medium : Marathi / English Marathi
7. Present class BSW III year
8. Permanent Address Tanaji Malsare Nagar Asoda Road J
(With Phone / Cell No.) 9766366996

Signature of the Applicant
Bekeli



दूरदर्शन के माध्यम से शिक्षण प्रणाली का प्रयोग करने वाले शिक्षकों के लिए
एन सी ई आर टी ई द्वारा आयोजित 'एन सी ई आर टी ई शिक्षण प्रणाली का प्रयोग करने वाले शिक्षकों के लिए'
एन सी ई आर टी ई द्वारा आयोजित 'एन सी ई आर टी ई शिक्षण प्रणाली का प्रयोग करने वाले शिक्षकों के लिए'

Application Form

For the Admission of Certificate Course In

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counselling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - <u>NGO</u> |
|------------|-----------------|------------------|-----------|--|
| 266 | 14/11/22 | 600/- | | Roll No. <u>1320</u> Reg. No. Year - 2022-23 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk _____ Co-ordinate _____ Principal _____

To,
The Principal
Loksevak Mahabharato Chaudhari
College of Social Work, Jalgaon

Respected Sir,
I requested for the admission to Certificate Course in NGO
Management for the Session 2022-2023



The necessary information for the admission is given below

1. Name in full - KALIT SAPANA BALLU
(In Block Letters) Surname Name Middle Name
 2. Mother Name Milu kali
 3. Father Name Balu kali
 4. Date of Birth 8 January 2002
 5. Caste : SC/ST/NT/SBC/OBC/OPEN SBC
 6. Medium : Marathi / English Marathi
 7. Present class B.S.W 3rd year
 8. Permanent Address Hingana, Tal. Yawal, Dist. Jalgaon
- (With Phone / Cell No.) 9370001304

Signature of the Applicant
sb.kali



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - <u>89191919</u> |
|------------|-----------------|------------------|-----------|---|
| <u>265</u> | <u>14/11/22</u> | <u>600/-</u> | | Roll No. <u>13</u> Reg. No. Year <u>2022-23</u> |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,

~~The~~ Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in N.G.O.

Management for the Session 20 - 20

The necessary information for the admission is given below

1 Name in full - KOSODE SAKSHI SANTOSH
(In Block Letters) Surname Name Middle Name

2. Mother Name Kosode Rupali Santosh

3. Father Name Kosode Santosh Gambhit

4. Date of Birth 12 December 2002

5. Caste : SC/ST/NT/SBC/OBC/OPEN SC

6. Medium : Marathi / English Marathi

7. Present class B9W 3rd year

8. Permanent Address Shantidut Nagat, Ravet

(With Phone / Cell No.) 9130974517 , 8999859108

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class | Roll No. | Reg. No. | Year |
|------------|-----------------|------------------|-----------|-------|----------|----------|------|
| 111 | 15/11/22 | 1200 | | 11 | 111111 | 111111 | 2022 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in N.G.O. Management
for the Session 20 222023

The necessary information for the admission is given below

1. Name in full - LAHASE SUSHIL VASANT
(In Block Letters) Surname Name Middle Name
2. Mother Name PUSHPA
3. Father Name VASANT
4. Date of Birth 15/09/1994
5. Caste : SC
SC/ST/NT/SBC/OBC/OPEN Marathi
6. Medium : Marathi / English MS-U-I
7. Present class At Po. Kerhale BK, Tal - Ravar
8. Permanent Address 9096428068
(With Phone / Cell No.)

Signature of the Applicant



LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Approved 'A' Grade Institute by the NMAC

APPLICATION FORM

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - BSH |
|------------|-----------------|------------------|-----------|--|
| Online | 14-11-2022 | 1200/- | | Roll No. BSH Reg. No. Year 2022-23 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,

The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to **Certificate Course in NGO Management** for the Session 2022-2023

The necessary information for the admission is given below

1. Name in full - **ARCHANA HARIDAS MAULE**
(In Block Letters) Surname Name Middle Name
2. Mother Name - **Jilabai Haridas Maule**
Surname Name
3. Father Name - **Haridas Narayan Maule**
4. Date of Birth - **15 December 2000**
5. Caste : **SCST/NTSBC/OBC/OPEN - ST**
6. Medium : **Marathi / English - Marathi**
7. Present class - **BSM 3d year**
8. Permanent Address - **At. Ravivangar Post. Thangpada Tal- Trimbakeshwar Dist- Nashik**

(With Phone / Cell No.) - **9307794584**

Signature of the Applicant



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - BSWI |
|------------|-----------------|------------------|-----------|---|
| 223 | 14/11/22 | 600/- | | Roll No. 20 Reg. No. 4134383 Year 2022-2023 |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,

~~Principal~~
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in

N.G.O. Management for the Session 2022-2023

The necessary information for the admission is given below

- 1 Name in full - Nehele Aparna Surname Sarkar Middle Name
2. Mother Name Smt. Sathana
3. Father Name Jayjay
4. Date of Birth 18-2-2005
5. Caste : SC/ST/NT/SBC/OBC/OPEN SC
6. Medium : Marathi / English Marathi
7. Present class B.S.W I
8. Permanent Address Gelani Complex Bhusraval.
(With Phone / Cell No.) 9225500922

Asmelkar
Signature of the Applicant



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counselling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - <u>MSW II</u> |
|------------|-----------------|------------------|-----------|--------------------------------|
| 105 | 15/11/22 | 600 | | Roll No. <u>205</u> |
| | | | | Reg. No. <u>Year-2022-2023</u> |

Remarks of the Selection Committee: The candidate named above is/is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
 The Principal
 Loksevak Manjukarao Chauthari
 College of Social Work, Jalgaon



Respected Sir,
 I requested for the admission to Certificate Course in N.G.O Management
 for the Session 2022-2023

The necessary information for the admission is given below

- 1. Name in full - Mojee Lokkrushon Durgadas
 (In Block Letters) Surname Name Middle Name
- 2. Mother Name Mandisha Durgadas Mojee
- 3. Father Name Durgadas Ukha Mojee
- 4. Date of Birth 18/04/1996
- 5. Caste : SC/ST/NT/SBC/OBC/OPEN ST
- 6. Medium : Marathi / English Marathi
- 7. Present class MSW-Ist
- 8. Permanent Address At Post. Mammwarbad Tal. & dist Jalgaon
 (With Phone / Cell No.) 832 9123848

Signature of the Applicant



Application Form
 For the admission to Certificate Course in
 Certificate Course in Human Resource Management
 Certificate Course in N.C.O. Management
 Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - Roll No. Reg. No. Year |
|------------|-----------------|------------------|-------------|---|
| 98 | 13/11/24 | 600/- | [Signature] | |

Remarks of the Selection Committee: The candidate named above is/is not recommended for admission

Admission Clerk _____ Co-ordinate _____ Principal _____

To,
 The Principal
 Loksevak Mahalokurao Chaudhari
 College of Social Work, Jalgaon



Respected Sir,
 I requested for the admission to Certificate Course in NGO

Consulting for the Session 20 - 20

The necessary information for the admission is given below

- 1. Name in full - PNVPTIL ROHAN MANOHAR Surname Name Middle Name
- 2. Mother Name Leelabai Manohar Panpatil
- 3. Father Name Manohar Bhivasesh Panpatil
- 4. Date of Birth 13-11-1994 SC
- 5. Caste : SC/ST/NT/SBC/OBC/OPEN Marathi
- 6. Medium : Marathi / English Marathi
- 7. Present class MSW-I
- 8. Permanent Address Gret NO 17s Plot no 1 shivram chawk Jedyar

(With Phone / Cell No.) _____
 Signature of the Applicant [Signature]



LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF
SOCIAL WORK
Jalgaon

College Code:
LMCCSW

Application No.:
5



For College use
only

Course Applied For: CC NGO MGT
Medium: MARATHI
Registration Date: 19/10/2022

Registration No.
2212300

1. Personal information section

| | Last Name | First Name | Middle Name |
|--------------------------------|----------------------|--------------------------|-------------|
| Name of Student | PATIL | DARSHAN | RAVINDRA |
| Father's Name | | | |
| Mother's Name: ASHA | In-House Student: NO | | |
| Marital Status: UNMARRIED | SaraI No.: | | |
| Date of Birth: 07/08/2001 | Gender: MALE | | |
| Place of Birth: RAVER | Blood Group: AB+ | | |
| Grandfather's Name: | Native Place: | | |
| Voter ID card No.: | Organ Donor: NO | | |
| Bank Name: | Account No.: | Transaction Type: ONLINE | |
| Religion: HINDU | Nationality: INDIAN | UDISE No. | |
| Aadhaar card No.: 615471546632 | Driving Licence No.: | Eligibility No.: | |

2. Address Details

| | | |
|----------------------------|---|------------------|
| Address of Correspondence: | AT MANGRUL POST KERHALE BK TAL RAVER DIST JALGAON | Pin Code: 425508 |
| State: MAHARASHTRA | District: JALGAON | Tehsil: RAVER |
| City: RAVER | | |
| Permanent Address: | AT MANGRUL POST KERHALE BK TAL RAVER DIST JALGAON | Pin Code: 425508 |
| State: MAHARASHTRA | District: JALGAON | Tehsil: RAVER |
| City: RAVER | | |

3. Contact Details

| | |
|--|--------------------------------------|
| Student Mobile No.: 9834826638 | Alternate Contact Number: 9834826638 |
| Student Email Id: DARSHANPATIL5262@GMAIL.COM | Parent phone: 9637074790 |

4. Legal Reservation Information Section

| | | |
|------------------------|--------------------------|---------------------|
| Domicile state: | Admission Category: OBC | Caste Category: OBC |
| Caste: REVE GUJAR | Phy. Handicapped: | |
| Caste Certificate No.: | Learning Disability No.: | |

5. Social Reservation (Special Category) Information Section

| SR No. | SOCIAL RESERVATION NAME |
|--------|-------------------------|
| | |



Application Form

For the Admission of Certificate Course in

- 1) Certificate Course in Human Resource management
- 2) Certificate Course in N.G.O. Management
- 3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - <u>116/1957</u> |
|------------|-----------------|------------------|-----------|--|
| <u>109</u> | <u>15/11/22</u> | <u>1200</u> | | Roll No. Reg. No. Year <u>2023</u> |

Remarks of the Selection Committee The candidate named above is /is not recommended for admission

Admission Clerk

Co-ordinate

Principal

To,
The Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,

I requested for the admission to Certificate Course in N.G.O. Management

for the Session 202220 23

The necessary information for the admission is given below

- 1 Name in full - PAWAR PRASAD BALASAHEB
(In Block Letters) Surname Name Middle Name
2. Mother Name Ratnabai
3. Father Name Balasaheb Shivajirao Pawar
4. Date of Birth 06/11/1997
5. Caste : SC/ST/NT/SBC/OBC/OPEN OBC
6. Medium : Marathi / English Marathi
7. Present class MSW-I
8. Permanent Address At po. kusumbe, Bk, Tal- Raver
(With Phone / Cell No.) 8805341521

Signature of the Applicant



UNIVERSITY BIHAR, PATNA
SOCIAL WORK

Admission

College Code
EMCCSW

Application No.:
7

For College use only

Course Applied For: **CC-SCW-1ST**
Medium: **BIHAR**
Registration Date: **20/10/2022**

Registration No.
2213967



1. Personal information section

| | | | |
|-------------------------------------|-----------------------------|---------------------------------|--------------------|
| Name of Student | Last Name | First Name | Middle Name |
| PNWAP | UMRISH | | HARSHITA |
| Father's Name | In-House Student: NO | | |
| Mother's Name: SUNITA KATI | Serial No.: | Gender: MALE | |
| Marital Status: UNMARRIED | Blood Group: B+ | Native Place: | |
| Date of Birth: 19/01/2002 | Organ Donor: NO | Transaction Type: ONLINE | |
| Place of Birth: MAHENDRGARH | UDISE No.: | Eligibility No.: | |
| Grandfather's Name: | | | |
| Voter ID card No.: | Account No.: | | |
| Bank Name: | Nationality: INDIAN | | |
| Religion: HINDU | Driving Licence No.: | | |
| Aadhar card No.: 50652230972 | | | |

2. Address Details

| | | | |
|-----------------------------------|---|-------------------------|-------------------------|
| Address of Correspondence: | AT MAHENDRGAR TAL. BHUSAWAL DIST. JALGAON AT MAHENDRGAR TAL. BHUSAWAL DIST. JALGAON | | Pin Code: 425111 |
| State: MAHARASHTRA | District: JALGAON | Tehsil: BHUSAWAL | City: BHUSAWAL |
| Permanent Address: | AT MAHENDRGAR TAL. BHUSAWAL DIST. JALGAON AT MAHENDRGAR TAL. BHUSAWAL DIST. JALGAON | | Pin Code: 425111 |
| State: MAHARASHTRA | District: JALGAON | Tehsil: BHUSAWAL | City: BHUSAWAL |

3. Contact Details

| | |
|--|---|
| Student Mobile No.: 8806145367 | Alternate Contact Number: 8806145367 |
| Student Email Id.: up192202@GMAIL.COM | Parent phone: 9021668962 |

4. Legal Reservation Information Section

| | | |
|-----------------------------------|---------------------------------|---------------------------------|
| Domicle state: MAHARASHTRA | Admission Category: NI-A | Caste Category: NI-A |
| Caste: NT | Phys Handicapped: NO | Learning Disability No.: |
| Caste Certificate No.: | | |

5. Social Reservation (Special Category) Information Section

| | |
|----------------|--------------------------------|
| SR No.: | SOCIAL RESERVATION NAME |
|----------------|--------------------------------|



DHANAJI NANA CHAUDHARI VIDYA PRABODHINI'S
LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF SOCIAL WORK, JALGAON
Accredited 'A' Grade Institute by the NAAC

Application Form

For the Admission of Certificate Course in
1) Certificate Course in Human Resource management
2) Certificate Course in N.G.O. Management
3) Certificate Course in Child Counseling

FOR OFFICE USE ONLY

| Receipt No | Date of Payment | Amount Deposited | Signature | Class - <i>BSW I</i> |
|------------|-----------------|------------------|--------------------|---|
| 110 | 19/11/22 | 600 | <i>[Signature]</i> | Roll No. 45 Reg. No. Year 2022-23 |

Remarks of the Selection Committee The candidate named above is/is not recommended for admission

Admission Clerk _____ Co-ordinate _____ Principal _____

To,
Principal
Loksevak Madhukarrao Chaudhari
College of Social Work, Jalgaon



Respected Sir,
I requested for the admission to Certificate Course in _____

N.G.O. Management for the Session 2022-2023

The necessary information for the admission is given below

- 1 Name in full - *Salunke* Surname *Dipali* Name *Pandharinath* Middle Name
2. Mother Name *Savita*
3. Father Name *Pandharinath*
4. Date of Birth *23/10/2002*
5. Caste : SC/ST/NT/SBC/OBC/OPEN *OBC*
6. Medium : Marathi / English *Marathi*
7. Present class *BSW I*
8. Permanent Address *Yashwanth Nagar Khedi Jalgaon.*
(With Phone / Cell No.) *7666446048*

[Signature]
Signature of the Applicant



LOKSEVAK MADHUKARRAO CHAUDHARI COLLEGE OF
SOCIAL WORK
Jalgaon

College Code:
LMCCSW

Application No.:
6



For College use
only

Course Applied for: CC NGO MGT
Medium: MARATHI

Registration Date: 19/10/2022

Registration No.
2205347

1. Personal Information section

| | | | |
|--|--|--------------------------|--------------------|
| Name of Student | Last Name | First Name | Middle Name |
| Father's Name | VALVI | INDRASING | PARSING |
| Mother's Name: MEKARAI | | In-House Student: NO | |
| Marital Status: UNMARRIED | | Serial No.: | |
| Date of Birth: 15/12/1999 | | Gender: MALE | |
| Place of Birth: SALLIBAR | | Blood Group: B+ | |
| Grandfather's Name: | | Native Place: | |
| Voter ID card No.: | | Organ Donor: NO | |
| Bank Name: | Account No.: | Transaction Type: ONLINE | |
| Religion: HINDU | Nationality: INDIAN | UIDISE No. | |
| Aadhaar card No.: 415625996907 | Driving Licence No.: | Eligibility No.: | |
| 2. Address Details | | | |
| Address of Correspondence: | AT SALLIBAR POST JAMANA TEL AKKALKUWA DIST NANDURBAR | | |
| State: MAHARASHTRA | District: NANDURBAR | Tehsil: AKKALKUWA | City: JAMANA |
| Permanent Address: | AT SALLIBAR POST JAMANA TEL AKKALKUWA DIST NANDURBAR | | |
| State: MAHARASHTRA | District: NANDURBAR | Tehsil: AKKALKUWA | City: JAMANA |
| 3. Contact Details | | | |
| Student Mobile No.: 9022941917 | Alternate Contact Number: 7083608638 | | |
| Student Email Id: INDRVALV7083@GMAIL.COM | Parent phone: 9022941917 | | |
| 4. Legal Reservation Information Section | | | |
| Domicile state: MAHARASHTRA | Admission Category: ST | Phy. Handicapped: | Caste Category: ST |
| Caste: Bhill | | Learning Disability No.: | |
| Caste Certificate No.: | | | |
| 5. Social Reservation (Special Category) Information Section | | | |
| SR No. | SOCIAL RESERVATION NAME | | |