



I.D. NO.

VPL_____

G.R. NO.

VASANTDADA PATIL PRATISHTHAN'S LAW COLLEGE

Office: Vasantdada Patil Educational Complex, Eastern Express Highway, Padmabhushan Vasantdada Patil Marg, Sion, Mumbai 400022

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Application For Admission to Second Year LL.B-3 YEARS 2024 - 2025

FIRST YEAR
ADMISSION THROUGH

CAP ROUND I/II/III	INSTITUTIONAL LEVEL ROUND- A-CAP	MANAGEMENT QUOTA

Passport Size Colour
Photograph of the
Candidate duly
Attested by the Head
of the Institution last
Attended or by a
Gazetted Officer.

CATEGORY

OPEN	SC	ST	VJ/DT	NT A	NT B	NT C	NT D	OBC	SBC	EBC	EWS	MINORITY	PH	J&K

1. STUDENT DETAILS - 1. FULL NAME OF THE CANDIDATE (CAPITAL LETTER one letter in each box)

SURNAME														
NAME														
FATHER'S NAME														
MOTHER'S NAME														

2. ADDRESS FOR CORRESPONDENCE:

CITY : _____ STATE : _____
PIN : _____ MOBILE(Student) : _____ E-MAIL ID (Student) : _____
RESIDENCE .PHONE NUMBER (With S.T.D. Code) : _____ MOBILE (Parents) : _____

3. MARKS OBTAINED IN PREVIOUS SEMESTERS / YEAR :

Semester	Grade Obtained	No. of Internal A.T.K.T.	No. of External A.T.K.T.	Total of Internal and External A.T.K.T.
Sem.I				
Sem.II				
Aggregate (Sem.I & II)				

A) DATE OF BIRTH : ____ / ____ / ____ (IN WORDS : _____)

B) PLACE OF BIRTH : _____ D) NATIONALITY : _____

C) RELIGION : _____ F) BLOOD GROUP : _____ G) GENDER : MALE / FEMALE

D) CASTE : _____ I) SUB CASTE: _____

4) STUDENTS BANK DETAILS:

Bank Name	Account No.	IFSC Code	MICR Code No.	Branch

5. A) AADHAAR CARD _____

UID NO. : _____

STUDENT EMPLOYMENT DETAILS

6. DETAIL OF STUDENT

A) NAME : _____
SURNAME NAME FATHER NAME

B) PRESENT DESIGNATION: _____
OR OCCUPATION

C) NAME OF ORGANISATION: _____ QUALIFICATION : _____

D) OFFICE ADDRESS : _____

(OFF. TEL. WITH STD CODE) _____ MOBILE : _____ FAX : _____

E-MAIL ID _____ E) ANNUAL INCOME : _____

PARENTS DETAILS

7. DETAILS OF FATHER/ GUARDIAN

A) NAME : _____
SURNAME NAME FATHER NAME

B) PRESENT DESIGNATION: _____
OR OCCUPATION

C) NAME OF ORGANISATION: _____ QUALIFICATION : _____

D) OFFICE ADDRESS : _____

(OFF. TEL. WITH STD CODE) _____ MOBILE : _____ FAX : _____

E-MAIL ID _____ E) ANNUAL INCOME : _____

(FAMILY ANNUAL INCOME FROM ALL SOURCES)

8. DETAILS OF MOTHER

A) NAME : _____
SURNAME NAME FATHER /HUSBAND NAME

B) PRESENT DESIGNATION : _____
OR OCCUPATION

C) NAME OF ORGANISATION : _____ QUALIFICATION : _____

D) OFFICE ADDRESS : _____

(OFF. TEL. WITH STD CODE) _____ MOBILE : _____ FAX : _____

E-MAIL ID _____

E) ANNUAL INCOME : _____

(FAMILY ANNUAL INCOME FROM ALL SOURCES)

9. DECLARATION TO BE SIGNED BY THE CANDIDATE AND TO BE ENDORSED BY THE FATHER OR GUARDIAN :

UNDERTAKING

I Mr./Mrs. _____ hereby declare that I am seeking admission in the **SECOND YEAR LL.B- 3 YEARS** course in Vasantdada Patil Pratishthan's Law College on my own.

1. I have read all the rules and regulation of admission declared by University of Mumbai for the year 2024 – 2025 and undertake to abide the same.
2. The information given by me in my application is true to the best of my knowledge and belief.
3. I have not been debarred from appearing at any examination held by BCI, Govt., University, College or any statutory body in India.
4. I hereby agree to conform to any rules, acts and laws enforced by Govt. and I hereby undertake that so long as I remain student of the college, I will do nothing either inside or outside the college which may result in disciplinary action against me under the rules, acts and laws.
5. I fully understand that the Principal of Vasantdada Patil Pratishthan's Law College, Sion- Mumbai will have full authority to expel me from the college for any infringement of the rules of conduct and discipline.
6. I am aware that there is likely to be a change in fee structure and I undertake to pay fee, whatsoever approved by the Fee Regulating Authority.
7. I am aware that, I will not be allowed to appear for the examination if I do not attend 75% classes in theory and 100% practicals.
8. I am aware that, I will not be allowed to benefit for the Govt. Scholarship / Freeship if I do not attend 75% classes in theory and 100% practicals.
9. I also know that, I will not be allowed to appear for the examinations if I fail to submit the satisfactorily all the assignment, journals, report as specified by the norms of University within stipulated time.
10. I am aware that if I indulge in Anti-National Activities contrary to the provisions of acts and laws enforced by the BCI, Govt. and any such activity contrary to rules and disciplinary norms as stated above may result in disciplinary action without prior notice from Principal and that I may expelled from the college due to the same.
11. I know that according to Maharashtra Prohibition of ragging Act 1999, ragging of any kind Physical or Mental within or outside the campus is strictly prohibited by law. A student found and proved accused in the same will be debarred from the course and shall not be admitted in any educational institution for a period of 5 years from the date of his dismissal. Convicted student may be punished with imprisonment for a term upto 2 years / or penalty which may extend upto Ten Thousand Rupees.
12. I have also read all the Anti Ragging Rules Regulations of UGC / BCI / DHE/University of Mumbai/ Govt. of Maharashtra and I hereby undertake to abide by all these rules and regulations and to give anti ragging undertaking to the Institute.
13. I am aware that it is mandatory to fill-in the online E-Scholarship Form for the Reserved Category (OPEN/SC/ST/DT/NT/OBC/SBC/EBC/EWS/MINORITY) at <https://mahadbtmahait.gov.in/> and submit duly filled-in print copy with required documents to the Students Section (Principal Office) within 15 days from the date of admission. Failing to do so, I am liable to pay the entire fees.
14. I shall open a Aadhar Link Saving Bank Account in Union Bank of India OR India Post Payment Bank, Sion branch and furnish the details of the Account Number, MICR CODE, NEFT CODE within 15 days from the date of admission.
15. I am also aware that I will submit all the requisite documents to the Institute which are required as per norms for the confirmation of my admission from the competent authority Commissioner for State Common Entrance Test Cell, Admission Regulating Authority, Directorate of Higher Education, University of Mumbai & Bar Council of India failing to do so I will be solely responsible for any action initiated against me by the competent authority and Institute will not be liable for the same.
16. Have you enrolled your name in voters list Yes ☐ No ☐
If yes please give Voter ID No. _____
If No Then I hereby undertake to enroll my name in voter list as per the norms of Election Commission of India.

YEAR	CATEGORY	SCHOLRASHIP FORM FILL YES / NO	FEE RECEIPT NO.	DATE	FEES PAID AMOUNT
FIRST YEAR					

Place : Sion-Mumbai. `

Date :

Signature of Father / Guardian
Name : _____

Signature of the Student
Name : _____

FOR OFFICE USE ONLY

Second Year College Fee Receipt No. _____

Amount _____

Date _____

Student Section

Scholarship Section

Exam Section

Accounts Section

Registrar

PRINCIPAL