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D.Y.PATIL, VIDYANAGAR , SECTOR - 7, NERUL, NAVI MUMBAI, 400 706.

ADMISSION FORM 2020

Important Instructions:

- Use only CAPITAL LETTERS to fill details
- Use black / blue ink to fill the form
- Wherever appropriate, tick the choice of answer
- Write in legible and neat hand writing

Use your recent
(not more than 3 month old)
Photograph here
(3.5 CM × 4.5 CM)

Application Number

School of Admission

- | | | | |
|-----------------------------------|--------------------------|--|--------------------------|
| • School of Medicine | <input type="checkbox"/> | • School of Pharmacy | <input type="checkbox"/> |
| • School of Dentistry | <input type="checkbox"/> | • School of Engineering | <input type="checkbox"/> |
| • School of Ayurveda | <input type="checkbox"/> | • School of Biotechnology & Bioinformatics | <input type="checkbox"/> |
| • School of Occupational Therapy | <input type="checkbox"/> | • School of Architecture | <input type="checkbox"/> |
| • School of Physiotherapy | <input type="checkbox"/> | • School of Management | <input type="checkbox"/> |
| • School of Nursing | <input type="checkbox"/> | • School of Law | <input type="checkbox"/> |
| • School of Allied Health Science | <input type="checkbox"/> | • School of Hospitality & Tourism Studies | <input type="checkbox"/> |

Level: After 10+2 After Graduation After Post Graduation

Name of Course: _____

