

Rules

1. This card is valid only for the current academic year.
2. Students are responsible for books borrowed against their tickets.
3. Only one book will be issued against the ticket at a time for a week.
4. If the book is not returned on due date, a fine of ₹ 1/- per day will be imposed from the due date of return till the date it is returned.
5. If the card is lost ₹ 25/- will be charged.

Address.:

Davane house, Pashan
Wade' madh jaly
mudal wj m - 61

Tel No.: 8169340744

Signature of Student

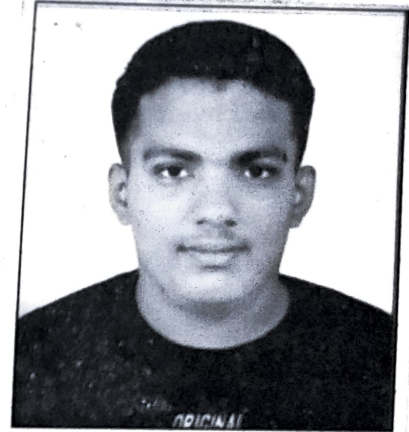
Librarian

CLARA'S COLLEGE OF COMMERCE

Yari Road, Versova, Andheri (w), Mumbai - 400 061.

Tel No.: 26315377 / 26365385 Fax.: 26365385

Email.: cwchs@hotmail.com



LIBRARY CARD No.: _____ Roll No.: _____

NAME: Piyush Davane

CLASS: TiyBcn DIV.: _____



CLARA'S COLLEGE OF COMMERCE

(Permanently Affiliated to University of Mumbai)
NAAC Accredited

Yari Road, Versova, Mumbai - 400 061

ADMISSION FORM

UID / Aadhar No. _____

For college use only →

Course Admitted to :

Form No.: 001

Admission Date : / /

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Kindly read the important instructions before filling the form
1. Use black ink to fill in the form and Do Not overwrite
2. Fill in the form in CAPITAL letters only.

(Student's Signature)

↑ Student should sign strictly inside this box only with black ink.

Course applied for : [T.Y. BCOM]

PRN No. 2022018400634014

ABC ID:- 642960462499

1. Personal Information :

Last Name	First Name	Father's / Husband Name	Mother's Name
DAVANE	PIYUSH	SHARAD	JASHREE
गावडे	पियूष	शरद	जशरी
Name of the student as printed on std Xlth Marksheet / passing certificate			
Name of the student in Devnagri / Marathi			
Marital Status : Unmarried / Married	Gender : Male <input type="checkbox"/> Female <input checked="" type="checkbox"/> Other <input type="checkbox"/>		
Date of Birth : (DD/MM/YYYY) : 01/05/2004	State : MAHARASHTRA	Blood Group (with Rh) :	
Place of Birth : MUMBAI	Mother Tongue : MARATHI	Citizen of (Country's name) :	
Religion : HINDU			

(1) Address in Mumbai	DAVANE HOUSE, NR, PASCAL WADL, BUS STOP
(2) Permanent Residential Address	MADH JETTY, MALAD (W)
	MUMBAI
	Pin Code : 400061

Contact Details : Mobile No. : 8169340744	Email ID : Davanepiyush2004@gmail.com
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Have you enrolled your name in voters List ? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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2. Legal Reservation Information :	Category : Open / Reserved	Mark (✓) whichever is applicable If Reserved : SC / ST / DT(A) / NT (B) / NT (C) / NT (D) / OBC / SBC ✓
Domicile of State :		
Caste : HINDU	Sub - Caste : MARATHI	If Physically Impaired : 1) Visual / Speech / Hearing / Orthopaedic 2) Mental Retardation 3) Learning Disability

3. Educational Details :		Result Status (Pass / ATKT)	SGPA	Grade	ATKT Sub-1	ATKT Sub-2
Sr. No.	Semester					
1	I	PASS	6.25	B		
2	II	PASS	7.25	B+		
3	III	PASS	6.00	B		
4	IV	PASS				

4. Subjects Opted :					
Sr.No.	Semester - V	Credits	Sr.No.	Semester - VI	Credits
Discipline Specific Courses					
1	Financial Accounting & Auditing - VII (Financial Accounting)	4	1	Financial Accounting & Auditing - IX (Financial Accounting)	4
2	Financial Accounting & Auditing - VIII (Cost Accounting)	4	2	Financial Accounting & Auditing - X (Cost Accounting)	4
Discipline Specific Elective (DSE) Courses					
3	Economics - V	3	3	Economics - VI	3
4	Commerce - V (Marketing)	3	4	Commerce - VI (H.R.M.)	3
Ability Enhancement Courses (AEC) (Any Two)					
1	Direct & Indirect Taxes - I	3	1	Direct & Indirect Taxes - II	3
2	Export Marketing Paper - I ✓	3	2	Export Marketing Paper - II ✓	3
3	Computer Systems & Applications - I X	3	3	Computer Systems & Applications - II X	3
Total Credits		20	Total Credits		20

5. Required Documents and Certificates :			Attached (Yes / No) (For office Use Only)
Sr. No.	Name of Documents / Certificates	Original / Attested True Copy	
1	Statement of marks <u>Std. XII</u> or equivalent exam	Attested True Copies - 4	
2	Statement of marks of Sem - I, II, III & Sem - IV including ATKT	Original & 4 Xerox Copies	
3	School Leaving Certificate	Attested True Copies - 2	
4	Affidavit for changed name / Marriage Certificate / Govt. Gazette	Attested True Copies - 2	
5	Certificate of Caste and validity	Attested True Copies - 2	
6	Non-creamy layer certificate	Attested True Copies - 2	
7	Domicile Certificate	Attested True Copies - 2	
8	Disability Certificate	Attested True Copies - 2	
9	Residence Proof : Ration Card / Lease Agreement / Latest Electricity Bill / Pan Card / Driving License / AADHAR Card (Any One)	Attested True Copies - 2	
10	Any other documents	Attested True Copies - 2	

6. Parent / Guardian Information :

Mother's Details	Father's Details	Guardian's Details
Name <u>Jayshree Davane</u>	Name <u>Shardul Davane</u>	Name _____
Age <u>45</u>	Age <u>46</u>	Age _____
Education <u>F.Y. J.C</u>	Education <u>F.Y. B.Com</u>	Relation _____
Occupation <u>house wife</u>	Occupation <u>service</u>	Education _____
Annual Income _____	Annual Income _____	Occupation _____
Mobile No. <u>9702271845</u>	Mobile No. <u>9702286700</u>	Annual Income _____
Email : _____	Email : _____	Mobile No. _____
		Email : _____

7. Other Information Section :

N.S.S. ☐ Yes ☒ No

Participation in Sports and Cultural Activities: If yes, Provide Details:

Level (College / State / National / International etc.):

8. Any Major illness: ☐ Allergy ☐ Hemophilia ☐ Asthma Any Other : _____

9. Minimum attendance for keeping terms under University Ordinance O.6086 : 75% (minimum) of classes on the aggregate and 50% attendance in each subject / course.

Declaration by student and Parent

I hereby declare that, I have read the rules related to admission and the information filled in by me in this form is accurate and true to the best of my knowledge. I will be responsible for any discrepancy in the form signed by me and I undertake that in the absence of any document, the final admission will not be granted and / or admission will be cancelled.

I also undertake to abide by the rules that will be enforced by the college in the implementation of University Ordinance O.6086 and accept that my application form for admission to the University examination may not be sent up if I do not fulfill the requirements laid down in Ordinance O.6086.

Date : 8.5.24

Shardul Davane
Signature of the Parent / Guardian

Rishabh
Signature of the Student

10. For College use only

Accountant / Cashier	Cash received : Receipt. No.	Remarks
Registrar / Office superintendent		
Principal / Director		

Form Verified by :

(Name)

(Signature)

CLARA'S COLLEGE OF COMMERCE
Yari Road. Versova, Andheri(West), Mumbai-400061

FORMAT FOR ANTI-RAGGING UNDERTAKING
(TO BE GIVEN BY THE STUDENT AND PARENT/GUARDIAN)

I. STUDENT'S DETAILS:

1.	Student's Name:	Surname Davare	First Name Piyush	Father's Name Sharan
2.	Date of Birth:	01/05/2004	Gender:	Male/Female
3.	Mobile No:		E-mailid: Davarepiyush2004@gmail.com	
4.	Present Address:	Davare house, HT pasolwadi but stop		
5.	Permanent Address:	Mach Jaley Inalad (W) mnm-6		

III. CLASS AND COURSE DETAILS:

1.	Name of the Course:		Aadhar Card No:	47.4728852072
2.	Class:	T.Y.B.COM	DIV:	
3.	Roll No:		PRN No:	2022016400634014

II. PARENT'S DETAILS:

1.	Parent's Name:	Surname Davare	First Name Sharan	Middle Name
2.	Mobile No:	9702286700	E-mailid:	Tulsidas
3.	Present Address:	— Same — as above		
4.	Permanent Address:			

1. I confirm that I have read UGC's Regulations on Ragging. (website: ugc.ac.in)
2. I confirm that I have read the Judgment of the Hon. Supreme Court on prevention of Ragging. (ugc.ac.in).
3. I promise that I will not indulge in Ragging or any form of violent behaviour. Neither will I tolerate being ragged or subjected to violence.
4. I understand that if I am accused of Ragging, the responsibility is on me to prove that I am not guilty.
5. I will not remain a spectator to acts of Ragging. I will report the matter immediately to my Principal/Management/Committee/Teachers and /or to the Anti- Ragging Help Line at 1800 180 5522 or email to info@antiragging.in

Name of the Student:		Signature:	
Name of the Parent:		Signature:	
Principal's Contact No:	98691806565	Office Contact No:	
College E-mail ID:	cwchs@hotmail.com	Website: claracollegeofcommerce.edu.in	
Anti-ragging Committee Cont. No:			

N.B: It is mandatory for students to register and submit affidavit of anti-ragging on line on the following website.
https://www.antiragging.in/Site/affidavits_registration.aspx