

Annexure - II

**APPLICATION FOR REGISTRATION OF COLLEGE TEACHERS
NCTE, BHOPAL**



1. Code No. of the college : 112039
2. Name of the college : Swa.: Dadasaheb Undale
Address with Telephone Nos. Adhyapak Vidyapeeth Undale
Tal- Karad Dist.- Satara
(02164) 256288
3. Name of the teacher : Surname Name
PATIL BALSING ANANDRAO
4. Date of Birth & Age : 01-06-1968
39 years
5. Educational Qualifications : M.A. B.Ed.

Degree	Year of Passing	Division/ Percentage of Marks	University	Remarks
Bachelor Degree	1994	50.50%	Shivaji University Kolhapur	
Post Graduate Degree	1997	50%	" "	
M.A./M.Sc.	1999	61%	" "	
B.Ed.	Appear	-	Y.C.M.M.V. Nasik	
M.Ed.	-	-	-	
M.Phil/Ph.D.	-	-	-	

6. Home Address of Teacher : AT-SHENE Po- Kasegaon
TAL- WALWA DIST:- SANGALI
7. Name of Witness : (02342) 239872
Name & Address : 1. _____
2. Shri Gavade S.B.
At/ Po- Shirali (Pulashi)
Tal- hatkarnagale
Dist:- Kolhapur 416112

Signature: _____
व्यवस्थापक
स्त्री मीण विकास शिक्षण संस्था
उंडाळे, ता. कराड, जि. सातारा

Signature: _____
Signature

This is to certify that the information given above is true and as per my academic records for which I shall be responsible.

Signature of Teacher

Recommendations of the college concerned

I hereby recommend WRC, NCTE to register Shri/Smt./Ku. _____ who is faculty member of our institution. I also certify the testimonials of the teachers.

Signature of Principal
_____ (Seal of the collage)