

# University of Mumbai

## Reminder – I



**No. Spl. Cell/2018-19/08-A/2018**

Date – 03<sup>rd</sup> December, 2018

### Circular :-

Attention of the Principals of the Affiliated Colleges and Directors of the recognized Institutions (Minority Colleges) is invited to the circular No. Spl. Cell/2018-19/08/2018 Date – 07<sup>th</sup> July, 2018 wherein they were requested to submit information pertaining to student admission during 2015-16 to 2017-18.

The information pertaining to the admission given by the minority colleges to minority categories, reserved categories and open categories during the academic year 2015-16, 2016-17 and 2017-18, is required to be submitted to the government on urgent basis and the same has not received from minority colleges.

Therefore, they are requested to submit the information of students admission in the (on excel sheet) enclosed proforma (A, B and C) for the academic year 2015-16, 2016-17 and 2017-18 to the Deputy Registrar, Special Cell, University of Mumbai, Fort, Mumbai – 400 032 and on the e-mail address [dr.specialcell@fort.mu.ac.in](mailto:dr.specialcell@fort.mu.ac.in).

The circular alongwith the proforma (A, B and C) is uploaded on the University website [www.mu.ac.in](http://www.mu.ac.in).

(Dr. Dinesh Kamble)  
Deputy Registrar  
Special Cell

To  
The Principals of the Affiliated Colleges and Directors of the Recognized  
Institutions (Minority Colleges) .

(Dr. Dinesh Kamble)  
Deputy Registrar  
Special Cell

**Minority Colleges**

**FORM A**

ACADEMIC YEAR 2015-2016

Name of the Institution / College Department :- \_\_\_\_\_

Tel./Fax No. : \_\_\_\_\_

Sr. No.	Name of the Course	Type of Minority	Intake Capacity	Admission given to						
				Minority Category	SC	ST	DT/NT	OBC/SBC	Open	Total

Signature of the Principal/Director Head

**Minority Colleges**

**FORM B**

**ACADEMIC YEAR 2016-2017**

Name of the Institution/College Department :- \_\_\_\_\_

Tel./Fax No. : \_\_\_\_\_

Sr. No.	Name of the Course	Type of Minority	Intake Capacity	Admission given to							
				Minority Category	SC	ST	DT/NT	OBC/SBC	Open	Total	

Signature of the Principal/Director- Head

**Minority Colleges**

**FORM C**

**ACADEMIC YEAR 2017-2018**

Name of the Institution/College Department :- \_\_\_\_\_

Tel./Fax No. : \_\_\_\_\_

Sr. No.	Name of the Course	Type of Minority	Intake Capacity	Admission given to						
				Minority Category	SC	ST	DT/NT	OBC/SBC	Open	Total

Signature of the Principal/Director Head