



"Education through self - help is our motto" - Karmaveer.

**RAYAT SHIKSHAN SANSTHA, SATARA.**  
**KARMAVEER BHAURAO PATIL MAHAVIDYALAYA,**  
**PANDHARPUR. DIST. - SOLAPUR**



**Identity Card Form**

Full Name \_\_\_\_\_

Class \_\_\_\_\_ Year \_\_\_\_\_

Date of Birth \_\_\_\_\_ Blood Group \_\_\_\_\_

Father's Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Mobile No. Self :

Email Id \_\_\_\_\_ Organ Donar : Yes / No

Date : \_\_\_\_\_

Sign of the student

Please paste a passport  
size [35 mm X 45mm]  
photograph here,  
Do Not staple photo  
should not exceed  
the borders