



सावित्रीबाई फुले पुणे विद्यापीठ

महाविद्यालय व विद्यापीठ
विकास मंडळ,
सावित्रीबाई फुले पुणे विद्यापीठ,
पुणे-४११ ००७.

दुरध्वनी क्र.
(०२०) २५६०१२६३

संदर्भ क्र. : ओएसडी/बीसीयुडी/३१२

दि. ०९/११/२०१५

प्रति,
मा. प्राचार्य/ संचालक,
सर्व विद्यापीठ संलग्न महाविद्यालये व
मान्यताप्राप्त शिक्षण संस्था.

महोदय,

सावित्रीबाई फुले पुणे विद्यापीठ, महाविद्यालये व विद्यापीठ विकास मंडळाच्या वतीने सन २००६ पासून महाविद्यालयीन विद्यार्थ्यांमध्ये संशोधन वृत्तीला चालना देण्यासाठी आविष्कार, अन्वेषण इ. स्पर्धांचे आयोजन केले जाते. सावित्रीबाई फुले पुणे विद्यापीठाने आविष्कार स्पर्धेत राज्यपातळीवर दैदिप्यमान कामगिरी केलेली आहे. या वर्षी सावित्रीबाई फुले पुणे विद्यापीठ अंतर्गत विभागीय स्तरावर आयोजित केलेल्या आविष्कार संशोधन स्पर्धेतील निवड झालेल्या प्रकल्पांची विद्यापीठ स्तर आविष्कार स्पर्धा दिनांक ११ व १२ डिसेंबर २०१५ रोजी सावित्रीबाई फुले पुणे विद्यापीठ, पुणे येथे घेण्यात येत आहे.

कळावे,

sd/-

डॉ. रविंद्र जायभाये,

(आविष्कार समन्वयक)

विशेष कार्याधिकारी, म.वि.वि.म.

सोबत :- वेळापत्रक, नियमावली व रजिस्ट्रेशन फॉर्म

Guidelines for University level 'Avishkar-2015'

Time Table

Sr. No.	Areas/ Faculties	Date
1	Pure Science., Engineering and Technology., Commerce, Management, Law., Medicine And Pharmacy., Agriculture and Animal Husbandry., Humanities, Languages, Fine Arts, etc.	11 th & 12 th December, 2015
Registration Time : 9.00 to 10.00 am		

- There is restriction on number of students participating in each project presentation. **Maximum two representatives** are allowed to present the project at the University level Avishkar exhibition. Accordingly A.R.C.'s and Project guides are requested to recommend the best competitor for each project. From each shortlisted team one candidate will be recommended for the state level competition.
- The local hospitality will be provided to the participants.
- All required basic infrastructural facilities like working space, electricity, water, tables, and mounting boards will be made available by the University. For any special requirements, if any, participants should inform the coordinator well in advance.
- Registration is compulsory for all participants. Registration form in the prescribed format filled with all necessary details should be forwarded through the principal of the college /Head of the institution to the coordinator. Participants are instructed to submit the hard copy of the same at the time of registration.
- Participants have to bring project related equipments, infrastructure etc.
- The team members should carry two copies of passport size photograph.
- There will be no registration charges for participating in the competition.
- Certificates will be issued to all the participants from the University.
- Facility of mounting boards to display the posters (**1m X 1m size**) will be made available. The poster size of **1m X 1m size** will strictly be observed.
- The decision of judges will be final and binding on all participants.
- The projects shortlisted for University level will be informed about their selection on the same day.
- The selection of the final team for state level Avishkar competition will be done after performance at University level competition. The tentative dates of the state level competition will be 14th to 17th of January 2016.

For any further details contact on: 020-25601263 or email on osd_bcud@unipune.ac.in, avishkar.unipune@gmail.com



Board of College and University Development,
Savitribai Phule Pune University, Pune- 411007

University Level Avishkar-2015

Registration Form

Date: 11th & 12^h December 2015

Photo
1st
Participant

Photo
2nd
Participant

Category: _____

Level: - UG/PG/M.Phil.- Ph.D./TEACHERS

Title of Project: - _____

Name of Student: - 1. _____

Male/Female: _____ Age: _____ Date of Birth: ____/____/_____

Mobile No. _____ Email ID:- _____

Name of Student: - 2. _____

Male/Female: _____ Age: _____ Date of Birth: ____/____/_____

Mobile No. _____ Email ID:- _____

College:- _____

Name of Guide:- _____

Contact No. _____ Email ID: - _____

Name of Zone & Zonal Coordinator:- _____

Signature of Participant

Signature of A.R.C

Signature & Stamp
of Principal /Head

1. _____

2. _____

(Name _____)

*Note: - i. Fill all Information in Capital letters.

ii. The filled registration form should be submitted at the time of registration.