



**APPLICATION
FOR ADMISSION TO B.PHARM COURSE**

(Read the prospectus before filling the application form,
incomplete and incorrect information
will disqualify the application)

APPLICATION NO:

Affix Recent
Passport Size Colour
Photograph

Merit Management B.Pharm B.Pharm (Lateral Entry)

1.a) Name of applicant as in SSLC Book in Block Letters

b) Age c) Date of birth

d) BloodGroup e) Aadhaar

2.a) Religion & Caste/Community

b) Specify if SC/ST/OBC/OEC/ with relevant certificate

3.E-Mail 4. Nationality

5.Place of Birth with District & Taluk

6.a) Communication Address

Ph No.:

b) Permanent Address

Ph No.:

7. Enter the percentage of Marks scored in the following examination

Exam Passed	Name of the Board/University	Year of Passing	Class Obtained & attempt of passing	Medium of Instruction	% of Marks obtained in aggregate of all subjects
S.S.L.C. Equivalent					
HSC/ Equivalent					
D.Pharm					

8. Enter the Marks scored and percentage in Qualifying examinations.

Subject	Physics	Chemistry	Biology	Computer Science	Mathematics	English	Malayalam	Total
Maximum Marks								
Obtained Score								
Grade								
Percentage								

9. Percentage in PCB/PCM.

10. Enter the Marks Scored and percentage in D.Pharm.

1 st Year	2 nd Year	Total		Percentage
		Max. Mark	Scored	

11. Detail regarding the applicant's parent or guardian

a) Name

b) Relation Ship with applicant

c) Occupation & Designation

e) Annual Income

f) Official address of the Parent or Guardian

Email:	Ph No.:
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12. Whether the applicant had received any financial scholarship (Give Details)

13. Whether hostel accommodation is required

DECLARATION

I hereby declare that the above information furnished by me in this application and the enclosures are true. I will not indulge in any form of ragging, I know it is a criminal offence and if found guilty, I will be summarily dismissed. I promise to abide by the rules and regulations of the institution.

Date:

Signature of Applicant

.....
I hereby agree to co-operate with the college to ensure the rules and regulation framed in the interest of my ward

Place:

Date:

Signature of Parent / Guardian

DOCUMENTS/CERTIFICATES TO BE ATTACHED

1. Printout of Application (For Merit Students)
2. Allotment memo (For Merit Students)
3. Receipt of fee remitted (For Merit Students)
4. Mark list of Qualifying Examination (SSLC, PLUS TWO)
5. Transfer Certificate (TC) & Conduct Certificate issued by the institution last studied
6. Migration certificate
7. Eligibility Certificate (CBSE, ICSE)
8. Certificate for SC/ST/OBC/ (Caste/Community and Income Certificates)
9. Pharmacy Council Registration Certificate (For D.Pharm Students)
10. Physical Fitness Certificate from Asst. Surgeon
11. Certificate Showing Vaccination against Hepatitis B
12. Four passport size & Two stamp size colored photographs with white background.
13. If any other, Please specify

FOR OFFICE USE ONLY

Admission No:

Date of Admission:

Selected

Not Selected

Signature of Administrator

Signature of Principal