



Paste a recent passport size photograph

# HGEA COLLEGE OF PHARMACY

Ghatiyali, Chas, Bokaro

Approved by PCI, New Delhi & Jharkhand Pharmacy Council, Ranchi

## APPLICATION FORM FOR ADMISSION INTO D. PHARM/B.PHARM COURSE

(To be filled in by the Office)

Admission No.....

Category.....

(To be filled in by Candidate)

1. Name of Candidate: .....
2. Father's name: .....
3. Mother's name: .....
4. Date of Birth: .....
5. Nationality: .....
6. Religion: .....
7. Category: .....
8. Sex: .....
9. Permanent address: .....
10. Corresponding address:.....
11. Contact No. ....e-mail id.....
12. Father's occupation .....Annual Income.....
13. Mother's occupation .....Annual Income.....
14. Name of qualifying examination passed.....

15. Academic details:

SN	Examination Passed	Year of Passing	Board/ University	Marks Secured	%	Division
1	10 <sup>th</sup>					
2	Intermediate					
3	Other (If any)					

16. Documents and Certificates enclosed:

- |       |   |        |
|-------|---|--------|
| i.    | Self attested copy of 10 <sup>th</sup> Mark sheet       | Yes/No |
| ii.   | Self attested copy of 10 <sup>th</sup> Pass certificate | Yes/No |
| iii.  | Self attested copy of Inter Mark sheet                  | Yes/No |
| iv.   | Self attested copy of Inter Pass certificate            | Yes/No |
| v.    | Self attested copy of qualifying examination mark sheet | Yes/No |
| vi.   | Self attested copy of caste certificate                 | Yes/No |
| vii.  | College leaving Certificate/ Migration                  | Yes/No |
| viii. | 8 recent passport size colour photograph                | Yes/No |

**DECLARATION OF STUDENT**

I..... (Candidate's name) certify that all information furnished by me in this application is true. I undertake that if I am found to have furnished any false information my application shall be cancelled and such other action as deemed legally justified may be taken against me.

Place:

Date:

**Full Signature of Applicant**

**UNDERTAKING BY PARENT/ GUARDIAN OF CANDIDATE**

I Shri .....Resident at..... do hereby undertake to pay the fees (which is non refundable on cancellation of admission or any other condition) for admission of my son /daughter / spouse / ward..... in the event of his/ her selection or admission and I shall abide by the terms and conditions imposed by the Management of the college regarding payment of fees throughout the period of his/ her study.

Place:

Date:

**Full Signature of Parent/Guardian**

**“ALL THE LEGAL MATTER IS UNDER THE JURISDICTION OF CHAS COURT”**