



VANDANA INSTITUTE OF PHARMACY

DARHWAL, BAHARIYABAD, GHAZIPUR (U.P)

College code-

Admission form for :- **D. Pharm**

Category: GEN OBC SC ST EWS PH

Academic session
20 20

Allotment: Upsee Jeecup Direct/management

All the particulars must be filled in capital letters:

1- Name of the Student _____

2- Date of Birth- DD/MM/YYYY

3- Father's Name _____ Occupation:- _____

4- Mother's name- _____ Occupation:- _____

5- Address: _____
 _____ Dist _____ State _____

PLEASE PASTE
YOUR RECENT
PASSPORT SIZE
PHOTO

E-mail: _____ Aadhar No. _____

Mobile No. _____ Alternate Mobile _____

Marks/Percentage (10+2) _____ Year of Passing:- _____

Subject	THEORY		PRACTICAL		TOTAL		%
	Maximum marks	Marks obtained	Maximum marks	Marks obtained	Maximum marks	Marks obtained	
Physics							
Chemistry							
Biology							
Maths							

DECLARATION

I _____ S/O Or D/O Mr./Miss/Mrs _____

Do hereby declare that the foregoing particulars are true & correct and nothing has been concealed. I further declare that I would strictly abide by the rules & regulations as enforced by the managing committee of the college . I will contribute my best to maintain high standards of academic environment & discipline in the college. I shall not be involved in any indisciplinary activity or antisocial acts .

Counter signed By :

ENCLOSURES :

- 1-Seat allotted letter
- 2-Class X Marksheetsheet
- 3- Class XII Marksheetsheet
- 4-TC Or Migration certificate
- 5-Diploma/Degree certificate
- 6-Caste Certificate
- 7-Income Certificate
- 8-Domicile Certificate
- 9- Passport size photo (5)
- 10- Aadhar Card

STUDENT SIGNATURE

GUARDIAN'S SIGNATURE

(FOR NRI STUDENTS ONLY)

1-NOC from Ministry of Health & Family Welfare

2- STUDENTS VISA

3-Eligibility certificate from AKTU that Candidate has passed the qualifying Exam .

FOR OFFICE USE ONLY

All the particulars/enclosures along with this form has been duly verified and found correct & valid.

RECEIPT NO:-..... DATE :-.....

It is recommended that Mr/ Missis admitted to

For academic session 20.....- 20.....

Admission Incharge:- _____



VANDANA INSTITUTE OF PHARMACY

DARHWAL, BAHARIYABAD, GHAZIPUR (U.P)

College code-

Admission form for :- **B. Pharm**

Category: GEN OBC SC ST EWS PH

Academic session
20 20

Allotment: Upsee Jeecup Direct/management

All the particulars must be filled in capital letters:

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2- Date of Birth- DD/MM/YYYY

3- Father's Name _____ Occupation:- _____

4- Mother's name- _____ Occupation:- _____

5- Address: _____

_____ Dist _____ State _____

PLEASE PASTE
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PASSPORT SIZE
PHOTO

E-mail: _____ Aadhar No. _____

Mobile No. _____ Alternate Mobile _____

Marks/Percentage (10+2) _____ Year of Passing:- _____

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