

Application No.:



**Bhartiya Education Society's
INSTITUTE OF PHARMACY**

Nagothane (Velshet), Tal. Roha, Dist. Raigad - 402 106

Tel.: Pharmacy - (02194) 222848, 202011.

Website : www.bespharmacycollege.com email : besvspcy@gmail.com

**APPLICATION FORM
FOR ADMISSION TO
FIRST YEAR D.PHARMACY**

Affix latest
passport
size B/W
Photograph

1. Name in full : _____
(Capital Letters Only) Surname Name Father's Name
2. Date of Birth : / / (In words : _____)
3. Name & Address of the School _____
from where the candidate _____
passed his H.S.C. Exam _____
4. Address for correspondence : _____

5. Permanent Address : _____

6. Father's / Guardian's Name : _____ Relation : _____
7. Father's / Guardian's Profession : _____
8. Nationality : _____ 9. Married / Unmarried : _____
10. Category (Open / SC / ST / NT / SBC / HD / DEF / OBC) : _____
11. Marks obtained in S.S.C. Examination : Total _____ Percentage _____
12. Marks obtained in H.S.C. Examination : Total _____ Percentage _____
13. Name of the Board (H.S.C.) : _____

| Subjects | Marks | Out of | Percentage |
|----------------------------|-------|--------|------------|
| Physics | | | |
| Chemistry | | | |
| Biology | | | |
| Group Total (PCB) | | | |
| Mathematics | | | |
| English | | | |
| Grand Total (All subjects) | | | |

DECLARATION TO BE SIGNED BY THE CANDIDATE

1. I hereby declare that I read and understood all the rules of admission to the Diploma course and I have consulted my guardian before filling this form.
2. I have not been declined by any examination authority from appearing any examination during the period of my proposed studies.
3. The information furnished by me in this application is true to the best of my knowledge and belief.
4. I fully understand that the offer of admission will be made to me depending upon my interest merit and availability of seat at the time of scrutiny of my application, when I will report to the admission authority according to the schedule of admission.
5. I hereby agree to confirm any rules, acts and laws enforced by Govt. and Head of Institution and I hereby undertake that I will do nothing either inside or outside the institution which may result in disciplinary action against me.
6. I understand that the admission being given to me on my claim on reservation, if any, is provisional and the same will be cancelled if the said claim is rejected by any competent authority.
7. I agree to pay the fees, regularly as prescribed by the institute and amendment made.

Place : _____

Signature of Candidate

Date : _____

DECLARATION TO BE SIGNED BY THE GUARDIAN

1. I have studied the rules of admission and agree to the same.
2. Particulars furnished by my ward are true to the best of my knowledge.
3. I undertake and bind myself to pay within due date on behalf of my ward such fees, charges and the dues as levied by the authorities from time to time.
4. I shall take care that my ward will behave properly and will do nothing except in the interest of his studies.

Signature of Guardian

Place : _____

Date : _____ Name _____

Details of Local Guardian : _____

Name : _____

Permanent Address : _____

Dist. :- _____ Pin :- _____

STD Code:- (_____) Phone No. _____ Mobile No. _____

LIST OF REQUIRED DOCUMENT TO BE ATTACHED WITH APPLICATION

| Sr.No. | Documents | Remark |
|--------|---|---------------|
| 01. | Marksheet of S.S.C. Examination | Yes/ No |
| 02. | School Leaving Certificate | Yes/ No |
| 03. | Marksheet of H.S.C. Examination | Yes/ No |
| 04. | Caste Certificate For SC/ST/DY/NT1/NT2/NT3/VJNT/OBC/SBC | NA / Yes / No |
| 05. | Certificate for having excluded from Creamy layer in case of NT2, NT3 & OBC | NA / Yes / No |
| 06. | Medical Fitness for Handicapped | NA / Yes / No |
| 07. | Domicile Certificate / Nationality Certificate | NA / Yes / No |
| 08. | Transfer Certificate in Case of Employees of Govt. of India or Govt. of India undertaking | NA / Yes / No |
| 09. | Certificate Claim Against Defense Service Personnel | NA / Yes / No |
| 10. | Any Other | |
| 11. | Six copies of latest B/W Passport size Photograph | Yes / No |

Total number of Documents attached :

Date : _____

Place : _____

Signature of Student

(For Office use only)

Scrutinised by : _____

Remark : Eligible / Non-Eligible for First Year Admission

Selected provisionally for Admission to First Year

Principal
