Rashtriya Shikshan Mandal's

N. N. Sattha College of Pharmacy

Anand Dham road, Opposite Side Bank of India, Ahilyanagar

Mob. No. 0241-2425999/ 7294943939 E-mail: rsmcopharmacy@gmail.com

ADMISSION FORM

Form No.:

Candidate Photo

To,
The Principal,
N. N. Sattha College of Pharmacy
Anand Dham road, Opposite Side Bank of India, Ahilyanagar.

Respected Sir,

I, the undersigned, am herewith applying to get admitted in **First Year/ Direct Second Year B. Pharmacy.**

1] CANDIDATE'S GENERAL INFORMATION:

1.1 Candidate Name: …….

1.2 Father's Name: …… Mother's Name: ……...

1.3 Gender: ……. 1.4. Date of Birth: / /

1.5 Married Status: **Single/Married**

1.6 Nationality: ……

1.7 Domicile: ……

1.8 Religions: ……

1.9 Category: …… 1.10 Caste: ……

1.11 Mother Tounge: ……

1.12 Non-creamy Layer: **Yes/No**

1.13 Caste Validity: **Yes/No**

1.14 Permanent Address: ……..

Taluka: …… District: ……

State: …… Pin code: ……

Parent Mobile No: …….

Candidate Mobile No: ……

1.15 Physical Handicapped: **Yes/No**

1.16 Reservation for Defense Service Person: **Yes/No**

1.17 E-Mail Address: ……..

1.18 Aadhar No.: …….

1.19 Family Annual Income: ……

1.20 Admission type and year: Govt./ Management: I/ II/ III/ IV

Exam Passed	Month & Year	Board/University	Percentage
S.S.C			
H.S.C			
D. Pharm			
Gap if Any			

2] Fee Paid Details: RTGS/DD/Bank Deposited

Amount in Rupees: …….

3] Student Bank Details for Scholarship:

Account No.	Name of Bank	Branch Name	IFSC Code

4. Declaration by the Candidate:

I have read all the rules of admission and on understanding these rules; I have filled this application form for consideration of submission of application form for admission to B. Pharm Course. The information given by me in this application is true to the best of my knowledge & belief. If at later stage, it is found that I have furnished wrong information and submitted false certificate (s), I am aware that my admission stands cancelled and fees paid by applicant will be non – refundable.

NOTE

1. No Students admitted to Final Examination if He/ She have attendance less than 80%
2. Ragging is strictly prohibited in college Campus.

Date: / /20 **Place**: Ahilyanagar

Student Signature **Parent Signature**

FOR OFFICE USE ONLY

Name of Student: …… **Class: ……**

Scholarship In-Charge **Account /Clerk**

Staff Sign **Student Section**

Principal