

MANJUSHREE INSTITUTE OF PHARMACY

Piplaj, Gandhinagar

ADMISSION FORM FOR BACHELOR OF PHARMACY

STUDENT DATA FORM

Fee Receipt No.	
Date	
Amount	

First Sem B.Pharm

Merit No. _____

PRN No. _____

Passport
Size
Photograph

(1) Full Name of Applicant / Student (In Block Capital Letters)

Surname	Name	Father's Name	Mother's Name

(2) Applicant full Address with Phone No.

Present / Permanent _____

Address _____

Pin Code :- _____

Father Mobile No :- _____ / _____

Mother / House Mobile No :- _____, Student Mobile No :- _____

Student's Adhar card Number: _____

(3) Full Name of Father (In Block Capital Letters)

Surname	Name	Father's Name

(4) Father's Occupation :- (Service / Business / Farmer): - _____

Details of Occupation:-

Father's Designation: - _____	Mobile No. _____
Organization / Company / Office Address: - _____	Phone No. _____

(5) Student's Date of Birth: - _____

(6) Place of Birth: - _____

(7) Religion: - _____ **Caste:** _____ **Sub Caste:** - _____

(8)

OPEN	EBC	SEBC	SC	ST	PH	CS / ES	OG

Category:-

(9) Gender (Mark):-

Male		Female	
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(10) Whether Hostel accommodation required :- Yes _____

No _____

11) Whether admitted in any Pharmacy & Any Courses Previously?

If Yes, Please Give Details: -

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(12) Name of qualifying examination last Passed: - _____

Name and address school last attended: - _____

(13)

Class	Month & Years of Passing	Seat No.	Board Conducting the Exam	Marks Obtained	Out of	Per. (%)
Std. 10 th						
Std. 12 th						

(14) Please Give the details of marks obtained at Std. 12th (H.S.C) or equivalent examination Qualification for the Admission.

Sr.No.	Subject	Theory Marks Obtained (A)	Out of	Practical Marks Obtained (B)	Out of
1.	Physics		100		50
2.	Chemistry		100		50
3.	Biology		100		50
4.	Mathematics		100	---	---
Total		300/400			150
5.	English		100	---	---
Total with English		400/500		---	---

(As per mark sheet) Percentage (%) _____ Percentile Rank: _____

Notes: - Candidates having passed senior certificate examination of CBSE, CISCE, New Delhi or any other Board should give the details of marks as per their mark sheets.

(15) Please give the details of GUJCET

GUJCET Seat No.	Month & year of Examination	Marks obtained	Out of

I hereby declare that,

- (I) the Information give above is true to the best by of my knowledge and brief.
(II) I shall a bid by all rules and regulation prescribed by the college.

Signature of Parent / Guardian

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Date & Place

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Signature of Candidate

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Documents to be attached:

1. ACPC Fee Receipt & ACPC Admission Slip
2. ACPC Registration copy with merit rank
3. S.S.C. (10th) Mark sheet of all attempts
4. H.S.C. (12th) Mark sheet of all attempts & Trial Certificate.
5. GUJCET Mark sheet
6. School Leaving Certificate / Transfer Certificate
7. Aadhaar Card
8. Cast Certi. SC/ST/SEBC/EBC - Family Income certi. – Passport size photo-5