

Sri Vishwaradhya Vidya Vardhaka Samsthe®

**SRI VISHWARADHYA INSTITUTE OF PHARMACEUTICAL SCIENCES.
ABBETUMKUR. YADGIR DIST-585202.**

Affiliated to Rajiv Gandhi University of Health Sciences, Bangalore. Karnataka.

Approved by Pharmacy Council of India.

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B. PHARMACY COURSE

ADMISSION APPLICATION FORM

<i>Candidate's Full Name (As per SSLC/10th Marks Card)</i>				
<i>Father's Name</i>				
<i>Mother's Name</i>				
<i>Gender (Male/Female)</i>				
<i>Date of Birth (DD/MM/YY)</i>				
<i>Religion</i>				
<i>Caste and Category</i>				
<i>Address</i>	Permanent Address	Present address		
<i>Candidate's Mobile No.</i>				
<i>Parents Mobile No.</i>				
<i>Candidate Aadhar No.</i>				
<i>Candidate's Email ID</i>				
<i>Educational Details</i>	SSLC or 10th %	PUC %	Student's SATS No.	Student's SSP ID

<i>Last studies college name & Address with PIN code.</i>	
<i>Sports/ Any activities Interested / participate during last education</i>	

Note: In case of any information/ document submitted by me found to be false or manipulated, I shall be liable for my admission cancellation and legal action against me.

Parent's Signature

Candidate's Signature

Date:

Date:

DECLARATION BY THE CANDIDATE

I undersigned seek admission to _____ course in your institution, if admitted. I agree to bound by the rules and regulations in force as well as those that may be framed in future by the institution.

I give the necessary particulars and undertake that as long as I am the student of the institution, I will do nothing either inside or outside the institution that interface with discipline.

Date:

**Place:
Candidate**

Signature of the

DECLARATION BY THE PARENTS/ GUARDIANS

I, _____ F/o, _____ G/o _____, who is admitted to 1st Sem B. Pharma hereby undertake that I will be personally responsible for any indiscipline act of my ward, inside and outside the college his colleagues and others.

If my ward found guilty, the authorities can punish him suitably, even including cancellation of his/ her admission.

I and my ward will be claiming the original certificates (in case of cancellation of admission) by clearing financial obligations up to final instalment.

The fees decided by candidate and management is mutually agreed at the time of admission.

Date:

**Place:
Guardian**

Signature of the Parent/

ENCLOSURES:

1. SSLC MARKS CARD with Two Sets of Xerox
2. PUC MARKS CARD with Two Sets of Xerox
3. TRANSFER CERTIFICATE with Two Sets of Xerox
4. AADHAR CARD COPY (Candidate's and Parents)
5. Recent Passport size colour Photographs (10 no)
6. Category certificate copy (If applicable)

FOR OFFICE USE

Admission No _____ Date of Admission _____ Acad. _____

Year _____

Category Sanctioned _____ Management/ Govt. _____

quota _____

Receipt. No. _____ Book No. _____

If any other details specify _____

Signature of Office In-charge