



Please Tick the facilities you require : Hostel / Transport

Sl.No.	Details of original Certificate	Submission Details (Submitted / Not Submitted)
1.	Transfer certificate	
2.	Higher secondary first and second year Mark Statement	
3.	D.Pharm (I & II Year) Mark statement	
4.	Community Certificate	
5.	Income Certificate	
6.	Nativity Certificate	
7.	Original Diploma Certificate	
8.	Aadhar card Xerox copy	
9.	Migration Certificate (Qualifying HSC/D.Pharm from Other state)	
10.	Eligibility Certificate (Qualifying HSC/D.Pharm from Other state)	
11.	Pharmacy Council Registration Certificate	
12.	First Graduation Certificate	
13.	Allotment order	
14.	Others	

### DECLARATION BY THE APPLICANT

I hereby declare that the information given below is true and complete to the best of my knowledge. I hereby undertake to abide by all the rules and regulations in force and those enforced from time to time. I will not do anything unworthy being student of this college either inside or outside or anything that will interfere with its orderly working and discipline. I am aware that the management has the full authority to expel me for lack of interest in studies, misbehaviour or continuous failures. Payment of fees in time is my responsibility and I know the delay of the same will attract penal charges decided by the Management.

Place :

Date :

Signature of the Candidate

### ATTESTATION BY THE PARENT/GUARDIAN

I hereby that declaration made above has been duly signed by ward in my presence.

Place :

Date :

Signature of the Parent/Guardian

EXTRA CURRICULAR ACTIVITIES ( LIST OF ANY REWARDS / ACHIEVEMENTS ) :

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FOR OFFICE USE ONLY

RECEIVED ALL THE ORIGINAL CERTIFICATES : Yes /No

PENDING CERTIFICATES :

SIGNATURE OF THE PRINCIPAL