

Bharathi College of Pharmacy

an abode of education

Recognised by Pharmacy Council of India
Examining Body- State Drugs Control Directorate, Ranchi, Jharkhand

		RE	GISTR	ATIO	N FC	RM	
Application No.: Session :						Affix your recent Passport size Photograph	
(For Office Use Only) (For Office Use Only) candidate							
		Roll No.		Enrollme	nt No.		canalaate
Subject under which admission sought Do not Pin or Staple							
1.	Name of the App	licant as in the Bi	rth Certificate or	Marks card o	f Standard X I	Exam.	
2.	Father's Name						
3.	Sex: Male	Female	4. Date of Bi	rth & Age :	Date	Month	Year Age
5.	Blood Group :		6. Marital Status : Married Unmarried				
7.	Address for Correspondence (do not repeat name)						
City State						Pin Code :	
	STD Code	TD Code Phone			Mobile :		
	E-mail						
8.	Permanent Address (do not repeat name)						
	City		State			Pin Code	
	STD Code		Phone			Mobile :	
9.	a) Nationality :						
	b) Religion : (Tick	() Hindu	Christian Muslin			Others	
	c) Community : (Tick) OPEN	ОВС	sc	ST	d) Caste :	

10. Details of Educational Qualifications (From X Standard onwards) Name of the Month & Year of Name of the School / College % S.No. Name of the University / Board Medium of Qualifying Exam. Passing Studied Instruction obtained X^{th} 1. XII^{th} 2. 3. Graduation 4. Post Graduation 5. 6. 11. Employment Details a) Employed (Tick) b) Name of the Company / Institution with Address 12. a) Whether Physically Handicapped: Yes No b) Certificate No. 13. NCC Certificates 14. Participation in State / National Level Co-curricular activities 16. Do you want Bus facility: Yes 15. Do you want hostel facility: Yes No No **Declaration** I, hereby declare that I satisfy the conditions of the eligibility advertised for admission to D.Pharma Course. All the information made in this application are true to the best of my knowledge and belief. I am aware that if at any time, it is found that any information given above is false then my candidate is liable to be cancelled. Date: Place: Signature of Applicant Details of self attested xerox copies of the certificate submitted by the candidate at the time of submission of form

SI. No.	Particulars of Certificate	Please Tick			
1.	10th Std. Mark Sheet(s)				
2.	10th Std. Pass Certificate				
3.	H.Sc. or Equipment Mark Sheet(s)				
4.	. Graduation Mark Sheet		Declaration of the candidate		
5.	Graduation Pass / Provisional Certificate		I declare that all the above Xerox copies		
6.	Post Graduation Mark Sheet		submitted by me with the application		
7.	Post Graduation Pass / Provisional Certificate		form are true and genuine.		
8.	College / Department Leaving Certificate				
9.	Migration certificate (Other than Ranchi Univ.)				
10.	Two self addressed envelops of size 5"x8"				
11.	Caste certificate		Signature of the Candidate		
12.	Residential certificate				
13.	Other Certificate(s) if, any.				