DAV COLLEGE OF PHARMACY

Chak 24 JRK, 2HDP Road, Goluwala Niwadan, Tehsil-Pilibanga, Hanumangarh, Raj. www.davpharmacycollege.com; email: shivratiwal@gmail.com; Phone: 9784333553

Application form for D. Pharma in Pharmacy Course Session 20..-..

For	office use only				
Receipt No. :				Affix recent Passport size photograph (with signature)	
		Recipient			
1.	Name of the Candidate (in block lett	ters)			
	Name of the Candidate (in hindi)				
	Mobile no	Email ID			
2.	Father's Name			Occupation	
	Designation and office address			Monthly Income	
	Mobile no		Landline no		
3.	Mother's Name			Occupation	
	Designation and office address			Monthly Income	
	Mobile no		Landline no		
4.	Permanent Address				
		Pin code		Phone No	
5.	Present Address				
		Pin code		PhoneNo	
6.	Date of Birth (infigures)	(in v	words)		
7.	Nationality Si	tate of Domicile		Martial status	
8.	SC/ST/OBC/SBC/Minority/ - Phys	ically disabled, spe	ecify:		
9.	Name of School/College last attended			Year	

10. Details of examination passed :

Name of Examination	Name of Board/ University	Year of passing the examination	Total max. marks	Total marks obtained	Percentage	Remarks
Secondary						
10+2 or equivalent						

Total	marks obtained in PCB / PCM in class 10+2	out of						
11.	Extracurricular activities							
12.	Any other information / Enrollment no.							
13.	Declaration by Father/Guardian							
	Iliscipline and conduct of my son/daughter/ward and in the college.		-					
Place	ə:	Signature						
Date :		Name						
14.	Declaration by Applicant							
I declare that all statements made in this application are true to the best of my knowledge and that the marks submitted by me in this application form pertain only to examinations conducted by a Board/University, and passed by me after undergoing studies as a regular student of a recognised college. I understand that if any statement is found wrong, my admission to the college will stand cancelled. If admitted, I promise to abide by the rules and regulations in force or those that may hereafter be made for the administration of the college and I shall do nothing either inside or outside the college which interferes with its orderly working and discipline. In all matters concerning me and the college, the decision of the Principal shall be binding on me.								
ENC	LOSURES (Attested Photocopies of)							
1.	Secondary Mark sheet / Certificate	Applicant's Signature						
2.	10+2 (or equivalent) Mark sheet	Full Name						
3.	Migration certificate	Place	Date					
4.	Transfer certificate							
5.								
6.								