



ADITYA BANGALORE INSTITUTE OF PHARMACY EDUCATION & RESEARCH

#12, Kogilu Main Road, Yelahanka, Bangalore - 560 064.

Affix your
recent passport
photograph

Application No.:

Application for :

- Ph.D**
(Pharmaceutics) **M.Pharm** **Pharm. D**
(Doctor of Pharmacy)
- Pharm. D** **B.Pharm** **D.Pharm**
(Post Baccalaureate)

- Name of the Candidate
(in block letters)
- Name of Mother & Father
- Sex Male Female
- Date of birth
- Nationality
- Whether SC/ST
(enclose xerox copy of caste certificate) Yes No
- Permanent Address
-
.....
Phone: E-mail:
- Local Address
-
.....
Phone: Mobile:
- Name and Address of the Institution studied last

■ Results

| Exam Passed | Name of the Board / University | Year of Passing | Reg. No. | Combination (Subjects) | Total Marks Scored/Percentage |
|----------------------|--------------------------------|-----------------|----------|------------------------|-------------------------------|
| S.S.L.C./ Equivalent | | | | | |
| 10+2 / Equivalent | | | | | |
| | | | | | |

Documents to be submitted (Original + 2 sets of xerox) Tick mark for documents submitted)

- Marks cards of qualifying exams Caste Certificate (if)
- Date of Birth proof certificate Character Certificate
- Transfer certificate Migration Certificate

- Proficiency in games / sports: Yes / No
If Yes mention Details
- Do you seek admission to the Hostel : Yes / No

DECLARATION BY THE CANDIDATE

I hereby declare that I have read and understood the rules and regulations of the Institution, as mentioned in the prospectus (College Admission & Hostel Admission - Rules & Regulations) and agree to abide by the Rules & Regulations of Aditya Institutions authorities.

Place:

Date:

Signature of Candidate

DECLARATION BY THE PARENTS

I shall be responsible for the payment of all fees and shall not ask for refund of fees paid in case of discontinuation of the course / cancellation of admission of my ward.

I shall also stand responsible for the conduct and good behavior of my ward and see to it that he/she attends class tests and viva regularly during the period of his/her college career.

I understand that student may be asked to leave the college at any time for misbehavior and irregular attendance.

I hereby declare that I have read and understood the rules and regulations of the Institution, as mentioned in the prospectus (College Admission & Hostel Admission - Rules & Regulations) and agree to abide by the Rules & Regulations of Aditya Institutions authorities.

Place:

Date:

Signature of Parent / Guardian

FOR OFFICE USE

Verified and found Correct.

The Candidate may / may not be admitted to course

Admission Committee

FOR OFFICE USE

| | |
|---------------------------------|-------------|
| Course: | Date: |
| Fees Collected Rs. (.....) | |
| Receipt No.: | Date..... |

Principal