

GOVERNMENT OF KARNATAKA

APPLICATION FOR ADMISSION TO IInd YEAR B. PHARM (LATRAL ENTRY)

Reg. No.....

Last date for submission 07-08-2014

Int. No.....

Note: 1. All Columns Should be filled.

Date of Interview: 09-08-2014

2. ALL ENTRIES TO BE MADE IN CAPITAL LETTERS ONLY

(As per S.S.L.C. Marks Card)

1. NAME.....
 PLACE AND DATE OF BIRTH
 NATIONALITY RELIGION CASTE.....

2.		Total Marks	Marks Obtained	Aggregate %
	Ist D. PHARM			
	IInd D.PHARM			
	TOTAL			

3. State the Category under which Applicant is Claiming Seat:
 (Xerox Copy of Relevant Certificate to be enclosed)

SC/ST/Category-I/II(a)/II(b)/III(a)/III(b)
 Defence/ Ex- Defence/ Physically Handicapped/
 Politically sufferer/General Merit

4. Name of the Parent/Guardian.....
 Occupation Name of the Organisation.....

Residential Address	ANNUAL INCOME	Father's
		Mother's
		Other Sources
		Total

5. Place of study (for Domicile Requirement): Name of the School/ College/Place/ State	STANDARD		PERIOD	
	From	To	From	To
	I			
	PUC			

Date:
Place:

Signature of the Parent

Signature of the Applicant

DECLARATION OF THE CANDIDATE

I. I..... claiming the seat under
 Category will not change my claim in future.

II. I solemnly and sincerely affirm that the statements and information furnished in this application form and the enclosures submitted are true. If it is found untrue. I am liable for prosecution and forfeiture of seat in the College.

Candidate

Signature of the

DECLARATION OF THE PARENT

I hereby solenly and sincerely affirm that the statements made and information furnished in my son's/daughter's of ward's application form as also in all the enclosures submitted by me/him/her are true. Should it, however be found that any information furnished there in is untrue. I realise that we are liable to criminal prosecution and I also agree that he/she would forego his/her seat in the College.

Parent

Signature of the

INSTRUCTIONS

- I. Application shall be addressed to Member Secretary, B. Pharm Selection committee. Government College of Pharmacy, P. Kalinga Rao Road, Bangalore-27.
- II. Original Document verification for eligible candidates at Government College of Pharmacy, P. Kalinga Rao Road, Bangalore-27 on 09-08-2014 at 10.00 am.
- III. Application shall be accompanied by the following attested copies:
 1. SSLC Marks Card
 2. Study Certificate (7 years of study in Karnataka)
 3. PUC or Equivalent Examination Marks Card.
 4. Ist & IInd Year D.Pharm Marks Card.
 5. Certificate from the Competent Authority in case of reservation claimed under. SD/ST/Form-I/II(a)/II(b)/III(a)/III(b)/ Defence/ Physically Handicapped.

- Note: 1. Passed in diploma in Pharmacy Examination from an institution approved by the Pharmacy Council of India under Section 12 of the Pharmacy Act and has secured Minimum of 45% marks. (40% for SC, ST, Cat-I, 2A, 2B, 3A, 3B Category).
2. Selection list display on Notice Board of Government College of Pharmacy & web site.

OFFICE USE

..... is provisionally selected for IInd B. Pharm course during the yearto at

List No.....

Sl. No.....

Category.....

MEMBER SECRETARY
Admitted/Not Admitted (Reason)

Signature of the Chairman