



SHADAN COLLEGE OF PHARMACY

A Muslim Minority Institution, Established by Shadan Educational Society
Permitted by Govt. of A.P., Approved by AICTE & Affiliated to JNTUH.

Before A.P. Police Academy, Peerancheru, Himayath Sagar Road, Hyderabad, - 500 008, A.P. India.
Tel: 040-24198012, 65221764, Fax: 040-24198012.
Email: shadan143pharmacy@yahoo.com | Website : www.shadanpharma.com

Category B - Application for admission into B. Pharmacy Course (Batch 2013 - 2014)

FOR OFFICE USE ONLY

APPLICATION FORM No. :		REGISTRATION No. :	
Date of Issue		Date of Submission	
Course offered	B. Pharmacy	Course Applied for	
Course Admitted			

Instructions to be carefully read before Filling the form

1. Application shall be legibly filled in English and submitted with all the enclosures on or before the last date.
2. Applications with wrong information and incorrect data will not be considered.
3. Applicants who have studied other than Board of Intermediate (A.P) / outside the State of A.P. / Country shall enclose the Eligibility Certificate/ Equivalency Certificate issued by Board of Intermediate Education, Hyderabad (A.P) and Migration Certificate.

	Max. Marks	Marks Secured	Percentage
Inter/ (10+2) aggregate marks & Percentage	<input type="text"/>	<input type="text"/>	<input type="text"/> %
Group Total marks & % (Excluding languages)	<input type="text"/>	<input type="text"/>	<input type="text"/> %
Total Number of Enclosures Submitted	<input type="text"/>	<input type="text"/>	
Local Area (OU/AU/SVU/Others)	<input type="text"/>		

Affix Latest Photo

Equivalency / Eligibility Certificate issued by Board of Intermediate Education NO. Date

Applicant's Details

NAME OF THE CANDIDATE (AS IN INTER/EQUIVALENT) IN BLOCK LETTERS

DATE OF BIRTH (AS IN SSC/EQUIVALENT) / / Age as on 31/12/2013
D D M M Y Y Y Y Y Y Y Y M M D D

ADDRESS FOR COMMUNICATION

PIN

PERMANENT ADDRESS

PIN

Phone Numbers (STD Code) Land Line

Mobile

Mobile

E-Mail Address :

Gender		Height (cms)		Blood Group	
Religion & Caste SC/ST/BC/OC		Mother Tongue		Nationality	

ACADEMIC DETAILS

EAMCET - 2013 DETAILS

Hall Ticket Number Marks Secured / 1 6 0

EAMCET-2013 Rank Minority Rank

Name & Address of the Tutorial attended for _____
EAMCET Coaching _____

Local Area	O U	A U	S V U	Others		Year of Passing	
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(10+2) DETAILS :-

CBSE **ICSE** **Board of Intermediate Education**

Hall Ticket Number

Total Marks Secured / Maximum Marks

SUBJECT	MARKS SECURED	MAX MARKS	PERCENTAGE
BOTANY (Theory + Practical)			
ZOOLOGY (Theory + Practical)			
PHYSICS (Theory + Practical)			
CHEMISTRY (Theory + Practical)			
ENGLISH			
II LANGUAGE			
TOTAL			

Note : (10+2) Students can directly put the marks of Biology in any one column either Botany or Zoology.

Medium of Instruction Second Language

Pass Division Over all Aggregate % Only Group % (B+P+C)

Group + English %

Name & Address of the Junior College Studied or (10+2) _____

Class	Name of the School attended	Division and Year of Passing	
SSC			
IX			
VIII			
VII			
VI			
I-V			

Name & Addresses of two Local References with Relationship and Photocopies of their Ration Card/ Voter ID / Pass port / Aadhar Card / PAN Card with respective Signatures.		
Reference	1	2
Name		
Relationship		
Address		
Phone		
Mobile		
E-mail		

ENCLOSURES

(All Enclosures are to be attested by the candidate / Parents)

- | | |
|--|----------------------|
| 1. Copy of Intermediate / 12th Exam Memo of Marks. | <input type="text"/> |
| 2. Copy of SSC / Equivalent Exam Memo of Marks. | <input type="text"/> |
| 3. Copy of EAMCET - 2013 Hall Ticket | <input type="text"/> |
| 4. Copy of EAMCET - 2013 Rank Card | <input type="text"/> |
| 5. Latest TC / Migration Certificate. | <input type="text"/> |
| 6. Equivalency / Eligibility Certificate issued by Board of Intermediate Education, if applicant has studied other than Board of Intermediate (A.P)/outside the state / country. | <input type="text"/> |
| 7. Copy of Passport / Driving Licence / Voter ID / Ration Card / Aadhar Card as proof of residence of Parents. | <input type="text"/> |
| 8. Copy of Passport / Driving Licence / Voter ID / Aadhar Card of two references, self attested by them | <input type="text"/> |
| 9. Bonafide & character Certificate from the last Institution to be enclosed, which would mention the status of his/her behavioural pattern specially in terms as to whether he/she has displayed persistent violent or aggressive behaviour or any desire to harm others. | <input type="text"/> |

DECLARATION BY THE APPLICANT

I hereby apply for admission to the course as per the details mentioned above.

I confirm that the information furnished by me above is true to the best of my knowledge and belief. If found false. I shall forfeit my admission and all fees paid. Further I shall abide by all the rules & regulations framed from time to time by the college, University and the State and I shall not indulge in any activity detrimental to the society's objectives. I give undertaking that I will not involve in any ragging activities and may be punished as per the rules in vogue, incase, I indulge in acts falling under the category of ragging in any manner.

Date:

Signature of the Applicant

Name:

UNDERTAKING BY THE CANDIDATE

I,..... S/o, D/o have carefully read and fully understood the law prohibiting ragging and the direction of the Supreme Court and the Central / State Government in this regard.

I have received a copy of the UGC Regulations on Curbing the Menace of Ragging in Higher Education Institutions, 2009 and have carefully gone through it.

I hereby undertake that

- I will not indulge in any behavior or act that may come under the definition of ragging.
- I will not participate in or abet or propagate ragging in any form.
- I will not hurt anyone physically or psychologically or cause any other them.

I hereby agree that if found guilty of any aspect of ragging, I may be punished as per the provision of the UGC regulations mentioned above and / or as per the law of force.

Applicant

Father

Mother

Guardian

In Case of any complaints / grievances please contact the Principal: