

SHADAN COLLEGE OF PHARMACY

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

Application for admission into B. Pharmacy Course (Batch		Tel: 040-24198012, 65221764	reefancterit, nimayatii Sagai Road, 4, Fax: 040-24198012. @yahoo.com Website : www.shadan	
APPLICATION FORM No.: Date of Issue Date of Issue Date of Submission	Applicat			ourse
Date of Issue Date of Submission Course Applied for Convener Management	FOR OFFICE USE ONLY			
Course Applied for Convener Management	APPLICATION FORM No. :		REGISTRATION No. :	
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 (Telangana) / Joutside the State of Telangana / Country shall enclose the Eligibility Certificate/ Equivalency Certificate issued by Board of Intermediate Education, Hyderabad (Telangana) and Migration Certificate. EAMCET - HT No. EAMCET - Marks secured. Inter(10+2) aggregate	Date of Issue		Date of Submission	
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(AS IN SSC/EQUIVALENT) ADDRESS FOR COMMUNICATION PIN	FATHER'S NAME			
ADDRESS FOR COMMUNICATION PIN			31/12/201	6
PERMANENT ADDRESS ——————————————————————————————————				
Phone Numbers (STD Code) Land Line Mobile Mobile			PIN	
Mobile	PERMANENT ADDRESS		PIN	
E-Mail Address :	Phone Numbers (STD Code)	Mobile		
	E-Mail Address :			

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

ACADEMIC DETAILS

(10 + 2) DETAILS							
CBSE		ICSE	CSE Board of Intermediate Education				
Hall Ticket Num							
SUBJE	:CT		MARKS SECURED in I & II Year	MAX MARKS in I & II Year		PERCE	ENTAGE
BOTAI (Theory + Pi							
ZOOLC (Theory + Pi							
PHYSI (Theory + Pi							
CHEMIS (Theory + Pi							
ENGLI	SH						
II LANGU	JAGE						
TOTA	۸L						
Medium of Instr	ruction			Second Language			
Pass Division			Over all Aggregate %	Only Grou	р % (М [.]	+P+C)[
Name & Addres	Group + English %						
Junior College or (10+2)							
Class			Name of the Sc	hool attended			vision and r of Passing
SSC							
IX							
VIII							
VII							
VI							
I-V							

Father's Name					
Mother's Name					
Address For Communic	ation				
				PIN D	
Office Address of (Father/Mother/both)					
				PIN	
Office Phone Numbers	(STD	Land Li Mobile	ne [[[
E-Mail Address of Parents / Guardian					
		Father		Mother	
Educational Qualifications					
Present Occupation					
Designation with Place of Work					
Yearly Income					
PAN Card Number					
Details of Other Childr (Enclosed additional s	en heet if rec	uired)			
Name		GENDER	Date of Birth	Present Occupation (Students/Employees	

Reference	1	2			
Name					
Relationship					
Address					
Phone			_		
Mobile			\dashv		
E-mail			\dashv		
	ENCLOSU	RES			
All Enclosures ar	e to be attested by the candidate / Parents)				
	rmediate / 12th Exam Memo of Marks.				
_	C / Equivalent Exam Memo of Marks.		\equiv		
· ·	ИСЕТ - 2016 Hall Ticket		\equiv		
· ·	MCET - 2016 Rank Card		_		
_	TC / Migration Certificate.				
	afide / Study Certificate from 6th to 12th.		_		
	Eligibility Certificate issued by Board of Intermedia	te Education, if applicant has studied other than	_		
	nediate (A.P)/outside the state / country.	te Education, il applicant has studied other than			
	pies of above all original certificates.				
. 3 passport size	, риотодгарну.				
	DECLARATION BY T	HE APPLICANT			
hereby apply for ac	mission to the course as per the details mentioned a	above.			
idmission and all fe he State and I shal	es paid. Further I shall abide by all the rules & regul not indulge in any activity detrimental to the societ	of my knowledge and belief. If found false. I shall forfei ations framed from time to time by the college, University y's objectives. I give undertaking that I will not involve in se, I indulge in acts failing under the category of ragging in	and any		
Date:	Signature of the Applicant Name:				
	UNDERTAKING BY T				
		of the Supreme Court and the Central / State Governme			
have received a co arefully gone throu		e of Ragging in Higher Education Institutions, 2009 and h	nave		
 I will not pa 	hat dulge in any behavior or act that may come under the rticipate in or abet or propagate ragging in any form rt anyone physically or psychologically or cause an				

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:

