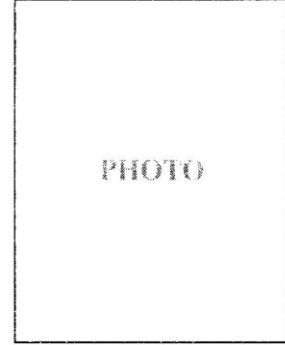


SRI SAI COLLEGE OF PHARMACY

Near Vidhanasoduha Layout, Laggre Bust Stop, Bangalore - 560 058,
Ph : 23596766, Mob. : 9844068838

Application For Admission to the
DIPLOMA IN PHARMACY
PART - 1
FOR THE ACADEMIC YEAR - 20 - 20



To,
The Principal
Sri Sai College of Pharmacy
Bangalore - 560 058.

Sir / Madam

No.

- I) I the undersigned seek admission to "Diploma in Pharmacy Part-I" in your Institution if admitted, I agree to bound by the rules & regulations in force as well as those that may be framed in future by the Institution
- II) I give below the necessary particulars & undertake that so long as I am the Student of the Institution, I will do nothing either or outside the Institution that will interfere with its discipline.
- III) I have attached the following original documents:
- 1) PUC/ 10 plus 2 passing certificate /
 - 2) Statement of marks of PUC II year/ Intermediate science examination.
 - 3) School Leaving /Transfer Certificate.
 - 4) Character Certificate from head of the Institution last attended.
 - 5) Physical Fitness Certificate.

IV) 1. Name in Full (Block Letters) :	
2. Permanent Address :	
or	
Correspondence Address with Contact Numbers	
3. Date & Place of Birth :	
4. Nationality Etc. :	
5. Martial Status :	
6. Name, Occupation &Address of Parent / Guardian :	

(P.T.O.)

7. Last School/College attended : (Specify the Name)						
8. Religion & Caste :						
9. Academic information :						
Examinations	Reg. No	Year of Passing	Marks Obtained	Total %	% Marks Physics Chemistry Maths	Name of University Board
10th + 2 or P.U.C. Science or Equivalent						

Date :

Place

Signature of the Applicant

I hereby declare that I hold myself responsible for the timely payment of all dues payable to the College of Pharmacy, Bangalore, in respect of my ward Named..... during that period of his / her study at your Institution & thereafter till the accounts are closed.

I also hold myself responsible for the disciplinary behavior of my ward.

Relationship with the applicant

Signature of Parent / Guardian

Date :

Place :

FOR OFFICE USE ONLY

Date :

Place :

Principal
Sri Sai Pharmacy
Bangalore - 560 058.