

R. C. Patel Educational Trust's

H. R. Patel Institute of Pharmacy, Shirpur Dist. Dhule

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Serving Nations Health

ADMISSION FORM (D.Pharm.)

PERSONAL DETAILS 1. Name of Candidate : (In BLOCK LETTERS as appeared in your last Mark sheet) 2. Name of Father/Guardian: (FIRST NAME) (SURNAME) (MIDDLE NAME) 3. Name of Mother: _____ (SURNAME) (FIRST NAME) (MIDDLE NAME) 4. Nationality: ______ 5. Date of Birth (DD/MM/YY) (As per your TC/LC): ______ 4. Blood Group: _____ 6. Religion: _____ 6. Caste (Applicable for Maharashtra State only): _____ 7. Height (Cms): ______ 8. Weight (Kgs): _____ 8. Whether Physically Handicapped: No 9. Whether ward of Defense Service Personnel? Yes r No 10.Permanent Address: ______ Town / City: _____ Pin Code: _____ Taluka: District: Ph. No.: STD Code () Number (**ACADEMIC DETAILS** Subject Marks Obtained Out of **Physics** Chemistry Biology Maths Total Grand Total _____ Out of ____ (HSC)

Grand Total _____ Out of ____ (SSC)

UNDERTAKING AND DECLARATION

- 1. I shall carry my Identity Card when I am in the institute premises and should produce it on demand.
- 2. I am aware that it is mandatory for me to wear my Uniform while entering into college premises. The Uniform consists of blue jeans, Light Blue Shirt with collar (available in college co-operative store)
- 3. It is compulsory for me to attend the institute from the day of opening to the last day of each term during the academic year.
- 4. I am aware that regular attendance for theory and practical is a must. In case my attendance is found to be less than 80% classes of theory, practical, my term will not be granted and I will not be allowed to appear for the University Examination. If I fail to submit satisfactorily all the assignments, journals and term work files as specified by the University within the stipulated time limit, I will not be allowed to appear in the University Examination. In both cases I have to seek readmission to the same class in the next academic year. Thus I will loose one academic year.
- 5. I shall behave respectfully to the teaching and non-teaching staff within and out side the institute premises. Otherwise, I shall be liable for disciplinary action.
- 6. I shall pay the stipulated fees within the given time span.
- 7. I must report regarding my change of communication address if any to the departmental and institute office. Institute will not be responsible for any loss of information due to any change of my communication address.
- 8. I should participate in extra curricular activities that the institute organizes from time to time.
- 9. I must convey about my absence to the concerned HOD / Local Guardian in case of illness or any other emergency cases.
- 10. Any rule by the University such as 'imposing limits on the number of attempts permissible to pass any examination' shall be binding on me.
- 11. I am aware that raging is strictly prohibited within or out side of institute premises. If I am found guilty in this case I shall be expelled from the institute. The fees will not be refundable in such cases. (Ref. Maharashtra Provision of Ragging Act 1999.)
- 12. If I am found indulging in anti-social activities, creating nuisance or any other mischief like strikes, demonstrations etc. within the Institute, I will be expelled from the institute. The fees will not be refundable in such cases.
- 13. I am aware that Principal of the institute has the right to expel me from the institute for any infringement of the rules of conduct and discipline prescribed by the institute or University or Government and the instructions given above.
- 14. I am aware that my Parents are required to visit the institute whenever requested by the Principal.
- 15. I am bound to abide by the rules and regulations of institute as stated in brochure and also those laid down by the Principal from time to time
- 16. I am aware of all the rules regarding the cancellation of admission and refund of fees and I agree to abide by the same.
- 17. I am ware that if I take admission in hostel, I am abide to follow the rules and regulation of same.
- 18. I am aware that all disputes pertaining to the admissions, cancellation of admission, refund of fee etc. shall fall within the jurisdiction of courts at Shirpur only.

I have read all the instruction stated in Admission Information Booklet and I agree to abide by the same. I also understand that my admission is subject to the verification from the Directorate of Technical Education, Mumbai, Pravesh Niyantran Samiti, Bandra (E), Mumbai and North Maharashtra University, Jalgaon

	Student		Parents /Guardian
Name:		Name:	
Signature:		Signature:	