



Shri Rameshwar College of Pharmacy

Village-Kandola, Tehsil-Dhaulana, District-Hapur-245301(U.P)

Ph: 0122-2987676, Mob 7599993670/71/72

E-mail Id: srcp.hpr@gmail.com

APPLICATION FOR ADMISSION

Please Fill The Form In Block Letters

Form No.....

Course Applied For: D.Pharm B.Pharm

Regular Entry Yes No

Admission to

Name of Candidate RIMPU KUMARI

Aadhaar No. 310452586845

Email ID Sinha brajeshnandan@gmail.com Mobile No. 7903702332

Father's Name KAPILDEO SINGH Occupation _____

Mother's Name BINDA DEVI Occupation _____

Mobile No. _____

Mobile No. _____

Date of Birth DDMMYYYY 09/03/1980 Gender Male Female Nationality _____

Category: General SC ST OBC MIN PH Religion _____

Permanent Address RIMPU KUMARI HOUSE NO. SH-017-0118, BUDHUCHAK BARMASIA KATI HAR State BIHAR Pin 8541105

Correspondence Permanent Address RIMPU KUMARI HOUSE NO. SH-017-0118, BUDHUCHAK - KATI HAR State BIHAR Pin 8541105

Guardian's Name (if any) Mr./Ms. BRAJESH NANDAN SINHA Occupation _____

Address BUDHUCHAK BARMASIA KATI HAR

Email ID Sinha brajeshnandan@gmail.com Mobile No. 7903702332

Do You Require Transport Facility (chargeable) YES NO

Preferred Bus Stop _____

Documents attached: Tick the check box-

i) X Mark Sheet () / Pass Certificate ()

ii) XII Mark Sheet () / Pass Certificate ()

iii) B.A./ B.Sc./B.Com (Graduation & Degree): Tick the check box-

Ist Year ()

IInd Year ()

IIRD Year ()

Affix a latest Self attested passport size colored photograph

iv) M.A./M.Com./M.Sc.(Post Graduate & Degree) (if any) ()
 1st Year ()
 2nd Year ()
 Other education courses (if any) ()

Income Certificate (✓)
 Caste Certificate (✓)
 Domicile (✓)
 Aadhaar Card (✓)
 Voter I.D. Card ()
 Other documents (if any) ()

Do you think any other details (if any) _____

Undertaking

Certify that the information on page no.1 & 2 are true and correct to the best of my knowledge and belief. I fully understand that the decision of the college in this regard shall be final and binding. I certify that all the above stated information is correct to the best of my knowledge and belief. I agree that I will be held responsible for any misinformation given by me and understand and agree that provision of wrong or misinformation which can lead to cancel my admission and necessary action by the college.

Guardian's Signature

Name Brajesh Nandan Sainha

Mobile No. 7903702332

Relationship WIFE

Student Signature

Name Rimpu Kumar

Mobile No. 85218531

Checked By:.....

Admission Granted to Course

A/C OFFICER

1.20 Lakh 40K Discount

Total - 80K

Kamta Singh

PRINCIPAL