



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

Form No. 38
69802

Course Applied For: D.Pharm B.Pharm
Lateral Entry Yes No
Session 2019 to 2020

Name of Candidate MOHD SHAKIR Aadhaar No. 8762182620081
E-mail ID SRKhan9313@gmail.com Mobile No. 9568199054
Father's Name FIROZ KHAN Occupation _____
E-mail ID SRKhan9313@gmail.com Mobile No. 9568199054
Mother's Name AFZART KHATOON Occupation Nothing
E-mail ID _____ Mobile No. 9568199054



Date of Birth 07/08/1993 Gender Male Female Nationality Indian
Category: General SC ST OBC MIN PH Religion Muslim

Permanent Address WARD NO 4, MOHLLA BUS BISA
City TOWN DASNA GZR. State UP Pin 201015

Correspondence Permanent Address _____
City _____ State _____ Pin _____

Local Guardian's Name (if any) Mr./Ms. _____ Occupation _____

Address _____
E-mail ID _____ Mobile No. _____

Do You Require Transport Facility (chargeable) YES NO
If Yes Preferred Bus Stop NO

Documents attached: Tick the check box:-

- i) X Mark Sheet () / Pass Certificate ()
- ii) XII Mark Sheet Certificate () / Pass Certificate ()
- iii). B.A./ B.Sc./B.Com (Graduation & Degree): Tick the check box:-
 - Ist Year ()
 - IInd Year ()
 - IIIrd Year ()

iv) M.A./M.Com./M/Sc.(Post Graduate & Degree) (if any)

Ist Year ()

IInd 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 shall abide by the rules, regulation, and procedures of the college. I fully understand that the decision of the Principal in this regard shall final and bindings. 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 I fully understand and agree that provision of wrong or misinformation which can lead to cancel my admission and further necessary action by the college.

فیروز خان

Guardian's Signature

Name MO FIROZ KHAN

Mobile No. 9568199054

Relationship FATHER

Shay

Student Signature

Name MOHD. SHAIKIR

Mobile No. 9568199054

Checked By: *Sundee*

Admission Granted to Course

A/C OFFICER

6012 + 20

Sundee
2/8/19

Sundee
PRINCIPAL

25/1/20