



SARADA VILAS COLLEGE OF PHARMACY

**Application for Admission
 D.Pharm**

Passport size photo
 of the Candidate

Application No: _____ Admission No: _____ Year of Admission: _____

Name of the applicant _____
 (Fill in capital letters as
 in Class 10 markscard)

Date of Birth: Day Month Year Sex: Male Female

Nationality: Community or caste: SC / ST / BT / BC / OBC / GM

Please specify and enclose caste certificate and income certificate duly signed by competent authority.

AADHAR NO:

Name of the Father: _____

Name of the Mother: _____

Permanent Address: _____

Address for Communication: _____

Phone:

Phone:

Email Id of Student:

Email Id of Parent:

QUALIFYING EXAMINATION PASSED

Examination Passed	Name of the Institution	Reg No	Year of Passing	Total Marks	% of Marks in
					PCMB:
					PCM:
					PCB:

Xerox copies of the marks cards and other documents should be enclosed.

I DECLARATION BY THE APPLICANT

To
The Principal,
Sarada Vilas College of Pharmacy, Mysore.

I, S/o; D/o,
have read the rules and conditions for my admission into Diploma in Pharmacy.

1. I do hereby undertake that I will not cause any damage / deface to any property of the College and Hostel such as Buildings, Furniture, Electrical fittings, Laboratory equipment, Sports equipment etc. and any public property in the vicinity of the College.
2. I will regularly attend all my classes throughout the year and I will maintain a minimum of 85% of attendance as per the rules. If for any unforeseen reason I am not able to attend the classes for a long time without prior intimation to the Principal, I shall submit a valid explanation at the earliest.
3. I will appear for all the Terminal Tests and Examinations conducted by the College, without fail.
4. I will submit all the Assignments, Record Books, Home Work etc., in time for the purpose of continuous evaluation. I shall make an earnest attempt to achieve academic improvement in all the subjects throughout the year.
5. I shall keep up the good name of the College in all my thoughts, behaviour and actions.
6. I shall be disciplined in the College premises and not cause any disturbance to the learning.
7. I shall not indulge in ragging or in any other kind of misbehaviour.
8. I shall implicitly accept the decision of the Management as final in all matters of discipline.
9. I will not use any obscene or unparliamentarily language anywhere, especially with teaching staff whom I shall respect.
10. I shall not indulge in bad habits such as smoking, drinking or consumption of narcotic drugs.
11. I the undersigned hereby declare that all the information is true to the best my knowledge. If admitted to the college I agree to abide by all the rules, and regulations of the college.
12. In case the admission sought by me is refused by authorities owing to Government rules. I am prepared to take the refund of tuition and other fee paid by me. Admission in the college is subject to approval of the authorities.

Place:
Date:

Student's Signature

II DECLARATION BY THE PARENT OR GUARDIAN

I have read the above rules and conditions my ward has to follow and agree to the applicant's admission to First Year Classes. I shall be responsible for his / her good conduct, attendance and discipline during the period of his / her stay in the College. I understand that promotion / admission to the next higher class is not automatic. I assure that my ward will not indulge in any act which will tarnish the image of the College. If he / she do so, he / she may be expelled from the College. I will not have any claim whatsoever for the refund of fees, if my ward leaves the College on his / her own will or expelled by the College for breach of conduct, discipline or rules of the College. I am aware that the fees once paid shall not be refunded under any circumstances, if my ward discontinues the course in the middle; I am liable to pay fees for the remaining period also. I also declare that I hold myself responsible for the timely payment of the entire payable amount to the college in respect of my ward named during the period of his/her study at this institution and thereafter until the accounts are closed.

Place:
Date:

Signature of the Parent / Guardian

OFFICE NOTE

Date of Interview: Final decision: Approved / Rejected
Fees Collected:..... Receipt No: Date: Admission No:.....

Superintendent

PRINCIPAL

IMPORTANT NOTE

1. The admissions shall be confirmed only after approval by BEA and upon eligibility approval by BEA.
2. The responsibility of obtaining eligibility certificate by providing necessary documents and payment of correct fees to BEA entirely lies on student / parent / guardian / introducer. SVCP is not responsible for non approval of admission or non issue of eligibility certificate in time. SVCP shall only help the student to fill the application form and processing of the same.
3. The fees once paid shall not be refunded under any circumstances. If the candidate discontinues the course in the middle, they are liable to pay fee for the remaining period also.

FOR OFFICE USE ONLY

DOCUMENT	ORIGINAL	PHOTOCOPY
Class 10 marks card		
Class 12 marks card		
Transfer Certificate and Conduct Certificate		
Migration Certificate and/or Nativity Certificate		
Address Proof		
Identity Proof		
AADHAR Card		
Date of Birth proof		
Blood group report		
Photographs		
Anti-ragging affidavit (Declaration by Parent & Student)		
Undertaking by Parent		
Undertaking by Student		
Duly filled application form		
NSS, Annual day, Association, Sports fees	Rs.	Date:

Kindly produce this acknowledgment during document verification process.

Students are hereby informed that they should submit the original marks cards/certificates and fees in time. College will not communicate further.

If the documents are not submitted in time, it may result in cancellation of admission and no refund of the fees shall be entertained

Signature of Staff

Date:

Signature of Student

Date: