



Form No. \_\_\_\_\_

# INDU DEVI RANJEET KUMAR PRAKASH PROFESSIONAL COLLEGE

Approved by Pharmacy Council of India (PCI)

A statutory body under Ministry of Health & Family Welfare, Govt of India

Campus : Near Ekara Overbridge/Gumti, Hajipur, Vaishali-844125 (Bihar)

City Office : Station Chowk, Inside of Shivaji Dwar, Hajipur, Vaishali-844101 (Bihar)

Email : www.idrkppcollege1@gmail.com, Website: www.idrkppc.com

Contact : 9801088295, 8864008604

## COURSE APPLIED FOR

(Tick  whichever is applicable)

B. Pharm  D. Pharm  Session \_\_\_\_\_

Affix your recent photograph of 4 cm. x 3.5 cms. Sign the photograph such that part of it is on the paper

Fill in the Registration Form carefully in capital letters using a pen. Incomplete FORM will be summarily rejected. Registration to the programme, if granted on false information, will be ipso facto null and void.

Name : Mr./Ms.																									
Permanent Address																									
	Pin Code																								
Mobile No. (Whats App)																									
Mobile No. (Normal if any)													Email id :												

Correspondence Address (if different)																									
	Pin Code																								
Contact No.																									

Date of Birth	Date	Month	Year	Age	Sex		Religion	Hindu	Islam	Christian	Others
						F		M	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Aadhar No. \_\_\_\_\_

Father's Name Mr.																									
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Mother's Name Mrs.																									
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Parent's Mobile No. (Whats App)																									
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Parent's Mobile No. (Normal)																									
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Category	GEN	OBC	SC/ST	OTHERS
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### ACADEMIC QUALIFICATION

Name of Examination	Board/University/ Institute	Subjects	Passing year	Marks/ CGPA Obtained	Percentage Obtained	Class/ Division Obtained
HIGH SCHOOL						
INTERMEDIATE (10+2) with Science						
OTHER QUALIFICATIONS						

Professional Experience  Y  N (No. of years), if yes

Extra-curricular Activities / Games / Sports : \_\_\_\_\_

Family Background (State the occupation and distinctive positions held by your family members / relatives):

Name	Relationship	Designation	Organisation

Local guardian (if any) \_\_\_\_\_

Address \_\_\_\_\_

Contact No. \_\_\_\_\_

Source of information for the course : (Friends/ Relatives/News Papers Advt./ Hoardings'/Alumni/Others)

Please Specify \_\_\_\_\_

Transport Facility  Y  N  
(If required mark Y)

M

### DECLARATION

I hereby declare that the information supplied above is true and complete to the best of my knowledge and belief and my admission may be cancelled at any stage if it is found to be incorrect. I also undertake and abide by all the rules and regulations of the institute enforced from time to time.

Date

Place

\_\_\_\_\_  
(Signature of Father/Guardian)

\_\_\_\_\_  
(Signature of applicant)

### Check list of documents required at the time of admissions

**(Attach 02 sets of attested photocopies of all the marksheets, certificate and testimonials)**

1. High School Marksheet.
2. High School Certificate / Pass Certificate.
3. Intermediate Marksheet.
4. Intermediate Certificate / Pass Certificate.
5. Graduation Marksheet (if any)
6. Graduation Certificate / Pass Certificate (if any)
7. Migration Certificate (if any) (Original)
8. College/ University/Department Leaving Certificate/Transfer Certificate (Original).
9. Caste Certificate (if applicable)
10. Certificate/ Marksheet of any other qualification
11. 5 Photos
12. Aadhar Card

**Note :- False declaration and submission of documents will permanently disqualify the candidate from admission and necessary action will be taken against the candidate as per rule.**