

SINHGAD PHARMACY COLLEGES

Self – Attested Photo

(Approved by Pharmacy Council of India & AICTE)
(Affiliated to Savitribai Phule Pune University& Approved by Govt. of Maharashtra)

Pharmacy Admission 2015-16

Sinhg	gad Instititute of Pharr	naceutical S	Sciences. Kusgaoi	n, Lonavala 🖀 (02114-304324,⊠ sips@sinhg	
1.	Name of the Candidat (In Block Letters)			[Middle Name]	(Father's / Husband's Na	
2	In Devnagari Script:					
3.	Address for Correspon	ndence:				
				Ph.		
4.	Permanent Address:					
				Ph		
5.	Date of Birth (DD/MM/YY):6. SEX: Male/ Female/Transgender					
7.	Category: Open/OBC/SC/ST/NT (if any other please specify) 8. Religion:					
9.	Physics Marks / 10010. Chemistry Marks / 100					
11.	Biology/M/BT/COMP Marks /100 12. PCB/M/BT/Comp Marks/ 300					
13.	HSC Total / 600 14. Month & Year of Passing					
15.	Name of Board / Exam	nining Autho	ority			
16.	SSC Total / 700 15. Month & Year of Passing					
17.	Name of Board / Exam	nining Autho	ority			
18	Occupation of Parent: Service Business					
19. De	etails of Result:					
Arts/	Commerce/ Science/ other	Year of passing	Mark Obtained / Total Marks	Percentage	Board	
Std. X					SSC / CBSE	
					Any Other	
Std. XII or equivalent examination				HSC / CBSE Any Other		

DOCUMENTS REQUIRED AT THE TIME OF ADMISSION (Original + 3 Attested Copies)

1.	Statement Of Marks of H.S.C or other examination considered equivalent by the Board and having passed in					
	minimum of five subject with English as one of the subjects.					
2.	School / College Leaving Certificate (duly counter signed the Education Officer)					
3.	Passing Certificate of H.S.C or equivalent Examination					
4.	Migration Certificate					
5.	Caste Certificate					
6.	Caste Validity Certificate					
7.	Domicile Certificate					
8.	Any Other (Please Specify)					
9.	Total No. of Documents (s) Submitted					
Note:	Admission will be finalized only after submission of all documents & full payment of fees.					
applio	I hereby agree that, I have attached copies of only mentioned documents to my application and understand that my pplication will be approved on the basis of above documents supplied by me at the time of submitting this application.					
Date	<u>.</u>					

DECLARATION TO BE SIGNED BY THE CANDIDATE & PARENT / GUARDIAN AT THE TIME OF ADMISSION TO COLLEGE

Signature of Applicant

- 1. I have read the Rules of Admission for the year 2015-2016 and I have consulted my father / guardian and after understanding these rules, I have filled the application form.
- 2. The information given by me in this application is true to the best of my knowledge.
- 3. I have not been debarred from appearing at any examination held by any Government or Statutory examination authority in India.
- 4. I fully understand that I will be offered admission strictly on the basis of my merit and availability of seat.
- 5. I understand that no other document, other than those attached to the application form will be entertained for the purpose of claims / concession / weightages etc. in connection with my admission.
- 6. I hereby to abide by all the Rules, Acts and Laws enforced by Government / Principal / Management of the Institute from time to time and I also hereby give an understanding that as long as I am student of the College, I will do nothing either inside or outside the college / Institute/ Society against the existing rules, Acts. I am fully aware that this may result into disciplinary action against me as per the Rules, Act and Laws.
- 7. I fully understand that the Principal / Management of the college will have full right to expel me from College for my infringement of the rules and conduct and discipline as per the understanding given above.
- 8. I know that my ward will not be permitted to appear for his/her college / university examination if he/she fails to satisfy the college authorities on any of the following counts:
 - At least 75% attendance at lectures/ practical

Place:

- Attendance and performance at the college examination / tutorials.
- Good and disciplined behavior in the college premises
- Obedience of the instruction of teachers, staff and other college authorities
- Payment of college fees as prescribed and on time.

- I have noted that it may not be possible for the college authorities to inform me about the progress of my ward from time to time. I shall therefore keep myself in touch with my ward and the teachers concerned about his/her attendance of lectures, practical and tutorials.
- 10. I am aware that in any case my ward desires to leave the college for any reason, I shall inform the college authorities in writing so as to enable him/her to cancel the admission.
- 11. I am aware that the refund of tuitions fees or any part of it is possible only if the claim is made within 2 weeks from the date of commencement of the college.
- 12. I am aware that use of mobile phones is prohibited wherever academic activity is going on (Classroom, Laboratories, and Library) & shall abide by the same.
- e
- f

13.	The student should carry identity card regularly and it should be produced college or institute.	when demanded by the authority of the	
14.	I hereby agree that I have no objection in using my pictures in soft copy and events & advertisements and institute related activities.	d hard print form during promotions of	
Date	e: (Signature of Parent/Guardian)	(Signature of Candidate)	
Place	e: Name:	Name:	
	DECLARATION TO BE SIGNED BY THE CANDIDATE BELONGING T rstand that admission offered to me against the quota for reserved category is claim is rejected by the Director of Social Welfare, Maharashtra State.		
Date:	(Signature of Can	didate)	

DECLARATION TO BE SIGNED BY PARENTS / GUARDIANS BELONGING TO BACKWARD CLASSES

I hereby declare that:

Admission.

- 1. The particulars furnished by my ward in this application form are correct to the best of my knowledge.
- 2. I undertake and abide myself to pay on behalf of my ward such fees, charges etc. by due date which the college may declare from time to time and in the event of failure on my part and / or my ward the Principal of the college may take such action against my ward, as he may deem fit.

Date: (Signature of Parent / Guardian)

INSTRUCTIONS FOR FILLING IN APPLICATION FORM

- 1. This form should be filled in BLOCK LETTERS by the candidate in HIS/HER own handwriting.
- 2. The last date for receipt is as prescribed by the Principal of the College.

6. Admission Form Details: Form Fee: Rs. 500/-

- 3. Incomplete application form and those without attested copies of necessary certificate will not be considered.
- 4. A candidate who is found to have furnished false information or has suppressed any information, if admitted, will be expelled and his/her fees will be forfeited.
- 5. The candidate will have to produce the original copies of certificate and mark sheets at the time of scrutiny of candidate when called for the purpose.

Demand Draft (DD) No.		Dated:					
Bank Name:		Branch:					
DD to be drawn in favour of "Sinhgad Technical Education Society" payable at Pune)							
	(FOR O	FFICE USE)					
l.Name in Full:							
2. Choice of Course:							
3. SEX: Male F	emale						
4. Category: SC/ST/VJ/NT-1/NT	-2/NT-3/OBC/SBC/OPEN _						
Admission granted / admissio	n not granted						
Verified by			Principal				

Dy. Registrar (Admissions)

Aspirant can directly submitadmission form to the respective Institute(s) mentioned or can process through Centralized

Sinhgad Institutes

19/15 Smt. Khilare Marg., Off Karve Road Erandawane, Pune 411004 Maharashtra, India Phone: +91 20 25431001, Fax: 020 25458520 Email: admissions@sinhgad.edu

Visit us: www.sinhgad.edu