Next to Next to Lodha Panacea, Near Jain Temple, Bhadra Nagar, Desale Pada, Dombivali (East), Maharashtra- 421 201. 9209188966 / 9325160330 email: bombayipr@gmail.com



FIRST YEAR D PHARMACY ADMISSION FORM 2023-24

FIRST YEAR D. PHARMACY ADMISSION FORM 2023-24						
CAP Application ID	llment No. G.R. No. Roll No.					
		FOR OFFICE USE ONLY				
		AFFIX				
		A RECENT PASSPORT SIZE				
To, The Principal Bombay Institute of Pha Dombivali (East) . Maha		COLOUR PHOTOGRAPH				
Sir,						
	ication for admission	n. My details are given below,				
FULL NAME	SURNAME :					
	FIRST NAME					
	MIDDLE NAME					
GENDER	:	MALE FEMALE				
ADDRESS	:	A/P				
		TAL				
		DISTRICT				
		PIN				
AADHAR NO. CONTACT NO. (Landline)	:					
Student Mobile No.	:					
Parents Mobile No.						
EMAIL ID	:					
RELIGION	:	CASTE				
CATEGORY	:	OPEN SC ST OBC NT SBC				
DATE OF BIRTH	:	D D M M Y Y Y Y				
BIRTH PLACE	:	PLACE TAL				
NATIONALITY	:					
MARITAL STATUS	:	MARRIED UNMARRIED				
MOTHER TONGUE	:					
HEIGHT/WEIGHT	:	BLOOD GROUP :				
DOMICILE OF STUDENT	:					
DOMICILE OF PARENTS	:					

				PAI	RENTS/GU	JARDIAN	I DET	AILS				
F	ATHER'S NAI	ИE			: _							
N	OTHERS NA	ME			: _							
G	UARDIAN NA	ME			: _							
R	ELATION WI	TH GUA	ARDIAN (IF ANY	7)	: _							
S	ON/DAUGHT	ER NO.			: _							
C	CCUPATION	OF PAR	ENTS		: _							
Α	DDRESS				: _							
CONTACT NO. (GUARDIAN)			:									
Α	NNUAL INCC	ME			: [0-1 L	akh	2	-4 Lakh	4-6	Lakh	
						6-8 L	akh		bove 8 La			
					EXA	M RECOF	D					
S.No.	Exam	Name of School/College		Board	Year	Sea	at No.	Marks Obtained		%	Grade	
01	SSC											
02	HSC											
				1	PREVIOUS	EXAM F	RECO	RD				
	Subject		Marks Obtained	PCB	TOTAL	PCB %	6	РСМ '	TOTAL	PCM %	ME	RIT NO.
Ph	ysics											
Ch	emistry											
Bi	ology											
Ma	athematics											
En	ıglish											
	I/Wo horoby	cortify	that the informa	ation is		ERTAK			odgo and he	oliof I/Wof	ullyundors	etand that it
any inf	-	_	be false/incorr						_	-	-	
applica	ition for regis	tration	does not guara	ntee ad	mission to	my/our w	ard. If	my/our	son/daugl	nter is selec	cted for adı	nission, we
	agree and giv	e cons	ent to abide by t	he rule:	s regulation	s of Pharr	nacy C	College a	s applicabl	e now and a	amended f	rom time to
time.												
Date			Parent	s Name	& Sign					Student Na	ame& Sign	
Date	1				- O							

DOCUMENT SUBMITTED

S.No.	Name of Documents	Submitted	Remark
01	SSC Mark list		
02	SSC Board Certificate		
03	HSC Marklist		
04	HSC Board Certificate		
05	Leaving Certificate		
06	Indian Nationality Certificate		
07	Birth Certificate with Place of Birth		
08	Domicile Certificate of Candidate		
09	Domicile Certificate of Parents		
10	Cast Certificate (For MS*)		
11	Cast Validity Certificate (For MS*)		
12	Non Creamy Layer Certificate (For MS*)		
13	Income Certificate for EBC Candidate		
14	Gap Certificate		
15	Aadhar Card		
16	Migration Certificate (For OMS)		
17	Proforma - I		
18	Proforma - A (For Central Govt. Parents)		
19	Proforma - B (For Parents Presently Posted in Maharashtra)		
20	Proforma - C (Ex Serviceman)		
21	Proforma - E/F (For Physical Handicaped - P1,P2,P3		
22	Nationalised Bank Passbook Xerox		
23	Ration Card Xerox		
24			
25			

Caste Certificate : SC/ST/VJ/DTNT(A)/NT(B)/NT(C)/NT(D)/OBC/SBC Non Creamy Layer Certificate : VJ/DTNT(A)/NT(B)/NT(C)/NT(D)/OBC/SBC

*MS: Maharashtra State

*OMS : Other than Maharashtra State Student Signature

	ADMISSION ORDER
Admitted :	
Not Admitted :	Signature of the Principal