



APPLICATION FOR ADMISSION 2020-21

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Photograph

Admission to 1st Year B. Pharm/Lateral admission to 2nd Year B. Pharm

Name of the Student: _____

(In Block Letters)

Sex (Male / Female): _____ Date of Birth: _____

Father's Name: _____

Mother's Name: _____

Occupation of Father: _____ Blood Group: _____

Present Address with PIN Code	Permanent Address with PIN Code
Mobile no. self Mobile No. Parent:	Email Id:

Nationality: _____ Religion: _____ Caste: _____

Category: Open Gen/ SEBC/SC/ST/ EWS: _____ Annual Family Income: _____

Academic Particulars of 10+2 / Higher Secondary / B.Pharm / D.Pharm:

Qualification	Board/University	Year of Passing	School/College	Aggregate Marks / CPI
XII Science				
D Pharm				
Any other				
GUJCET / NEET/JEE	Percentile:		Whether registered in ACPC: YES / NO	ACPC RANK:

DECLARATION BY THE CANDIDATE

I hereby declare that the information given above is true and complete to the best of my knowledge. I understand that filling this form does not guarantee my admission. I hereby undertake to abide by all the rules and regulations in force and those enforced from time to time. I will not do anything unworthy being student of this college either inside or outside or anything that will interfere with its orderly working and discipline. I am aware that the management has the full authority to expel me for lack of interest in studies, misbehavior or continuous failures. Payment of fees in time is my responsibility and delay of the same will attract penal charges decided by the management.

Place :
Date : Signature of the Candidate Signature of Parent

EXTRA CURRICULAR ACTIVITIES (LIST OUT ANY REWARDS/ACHIEVEMENT):

PLEASE TICK THE FACILITIES YOU REQUIRE: HOSTEL / TRANSPORT

OFFICE USE ONLY

Admission Form No.: KCPH/Adm/20-21/
Form Checked by:
Date and Stamp: Signature of the Principal

PAYMENT DETAILS

DD / Cheque / NEFT / RTGS / Cash / On Line (Please Tick the mode of Payment)
Amount: _____ (Figures) _____ (Words)
Date: _____ Bank: _____ Branch: _____
Transaction id: _____
Cheque / DD no. _____

Document Check List (Self Attested) whichever applicable

- | | | |
|-------------------------------|--------------------------|-------------------------|
| 1. Aadhar Card | 2. XII Science Marksheet | 3. GUJCET Marksheet, |
| 4. School Leaving Certificate | 5. D.Pharm Marksheet | 6. Degree Marksheet |
| 7. Migration Certificate | 8. Income Certificate | 9. Category Certificate |



KHYATI
COLLEGE OF
PHARMACY

Admission Note

1. Download the admission form
2. Fill it
3. Self attest all relevant documents
4. Mail complete admission form with all documents
attached to khyaticollegeofpharmacy@gmail.com