



RAM GOPAL COLLEGE OF PHARMACY

Approved by- PCI Affiliation from Pt. B.D. Sharma University of Health Sciences,
Rohtak, Haryana State Government University

ADMISSION FORM

IMPORTANT INSTRUCTION TO FILL UP THE APPLICATION FORM :

1. WRITE IN **BLOCK CAPITALS** AND USE **DARK BLACK BALL POINT / GEL PEN** ONLY.
2. LEAVE A BLANK SPACE BETWEEN WORDS.
3. BEFORE FILLING UP THE FORM, GO THROUGH THE PROSPECTUS, RULES & REGULATION CAREFULLY.
4. SCRIBBLING / OVERWRITING / USING WHITE FLUID IS NOT ALLOWED.
5. DO NOT USE PREFIXES LIKE / SRI / SMT / MR. / MRS. BEFORE NAME / FATHER'S NAME / MOTHER'S NAME.

SESSION

Affix a
Recent
Passport Size
Photograph

LEET

1. Name of Candidate:																							
2. Father's Name:												Occupation:											
Office Address:																							
												Pin Code:											
Office Phone No.:												Mobile :											
E-mail ID:																							
3. Mother's Name:												Occupation:											
Office Address:																							
												Pin Code:											
Office Phone No.:												Mobile :											
E-mail ID:																							
4. Date of Birth (DD/MM/YY):						5. Nationality (Indian / Others):																	
6. Full Postal Address for Correspondence:																							
												Pin Code:											
Phone No. (Resi.):												Mobile :											
E-mail ID:																							
7. Permanent Address :																							
												Pin Code:											
Phone No. (Resi.):												Mobile :											

8. Sex (M/F): ☐ 8. Marital Status (M-Married / U-Unmarried): ☐ 9. Job Status (E-Empl/U-Unempl/S-Self Empl.): ☐
10. Category (GE-General / SC-Scheduled Caste / St-Scheduled Tribe / BC-Backward Class / Other Backward Class/ ☐☐☐
HA-Handicapped Disability.....%): (For SC/ST/OB/HA attach attested Photocopies of Certificate as Applicable)

11. References:

1. Name: Relation:
Address:
 Pin Code:
Phone No. (Resi.): Mobile :
2. Name: Relation:
Address:
 Pin Code:
Phone No. (Resi.): Mobile :

12. Particulars of Qualifying Examination from High School onwards :

Examination	Board/University	Year	Roll No.	Marks Obtained (%)	Subjects

13. Details of Diploma Result (Optional):

Roll No.	Marks Obtained	Merit Rank

14. List of Enclosures (Attested copies of the following):

- | | | | |
|---|--------------------------|---|--------------------------|
| a. OLET-201_ result card & admit card (Optional). | <input type="checkbox"/> | f. Matric Certificate as proof of age. | <input type="checkbox"/> |
| b. 10th Exam. Mark Sheet/Diploma Exam. Mark Sheet. | <input type="checkbox"/> | g. Matric Examination Mark Sheet. | <input type="checkbox"/> |
| c. Character Certificate from the Institute last attended. | <input type="checkbox"/> | h. Certificate of Resident of Haryana. | <input type="checkbox"/> |
| d. Copy of Cast Category Certificate for Reserve Category Candidate only. | <input type="checkbox"/> | i. Copy of Medical Fitness Certificate. | <input type="checkbox"/> |
| e. 3 Passport size photographs. | <input type="checkbox"/> | j. Any Others_____ | <input type="checkbox"/> |
| | | h. Migration Certificate (Original) | <input type="checkbox"/> |

DECLARATION BY THE CANDIDATE

I S/D/ohereby declare that
the above mentioned information is correct to my knowledge and belief. Any discrepancy found any time during the
course of studies, my admission may be cancelled.

Place :

Date :

(Signature of Candidate)