

**Kommareddy Venkata Sadasiva Rao**  
**SIDDHARTHA COLLEGE OF PHARMACEUTICAL SCIENCES**

VIJAYAWADA-520 010

(Sponsors: Siddhartha Academy of General & Technical Education, Vijayawada)

**APPLICATION FORM FOR ADMISSION INTO THE M.PHARM COURSE**  
**FOR THE ACADEMIC YEAR 2021-22 (Category-A)**

(Put √ mark)

Pharmaceutics

Pharmaceutical Analysis

Pharmaceutical Chemistry

FOR OFFICE USE ONLY	
Regd. No.	
Admission No.	
Date of Admission	
Roll No.	



Affix latest passport size photograph

1. Name in full (Block Letters) :   
( as per school records)

2. Date of Birth(as per school records) :

3. Age (in years) :

4. Nationality :  Mother Tongue :

5. Candidate's Permanent Address:  
(Parental Address)

Telephone No. ----- Mobile No. -----

Email ID -----

6. Address of the Candidate for sending communications :

Telephone No. ----- Mobile No.-----

Email ID -----

7. If Parent, Name : \_\_\_\_\_  
 Occupation (with details) \_\_\_\_\_  
 If Guardian, Name : \_\_\_\_\_  
 Occupation (with details) \_\_\_\_\_  
 Relation, If any, \_\_\_\_\_  
 Annual Income of Parent/ Guardian : \_\_\_\_\_

Telephone No s. : Office ----- Residential -----  
 Mobile No -----

**8. Particulars of Qualifying Examination Passed**

Name of the Course : \_\_\_\_\_  
 Name of the University : \_\_\_\_\_  
 Month / Year of Passing : \_\_\_\_\_  
 Registration No: : \_\_\_\_\_

	Marks obtained	Maximum Marks
Total Marks Obtained in all Subjects in all years (If GPA pattern, enclose year wise statement)		

Over-all Percentage / CGPA

9. (a) Month / Year of GPAT in which the Candidate if appeared : \_\_\_\_\_  
 (b) Percentile in GPAT : \_\_\_\_\_  
 (c) Month / year of PGECET in which the Candidate if appeared : \_\_\_\_\_  
 (d) Rank obtained in PGECET : \_\_\_\_\_

10. University area to which the Candidate belongs ( Put √ Mark) : ANU  AU  OU  SVU  KU  SKDU  Others

**11. NRI / Foreign Nationals Category:**

Name of the Institution where studied and country : \_\_\_\_\_

Course completed : \_\_\_\_\_

Month & Year of Passing : \_\_\_\_\_

CGPA on a scale of 10 : \_\_\_\_\_

Whether Equivalency Certificate enclosed : Yes / No

Passport No./ issuing country : \_\_\_\_\_

Visa valid upto : \_\_\_\_\_

12. Previous Institutions attended : (Intermediate / Pre – University / B.Pharm)

Name (s) Of the College(s)/ Places	Years of Study

13. Mention briefly the outstanding Achievements in sports and Games or in other co/extra-Curricular activities, if any

: \_\_\_\_\_

14. Do you require Hostel Accommodation: Yes / No

15. Name of the Student:

Student Aadhar no.:

Name of the Father:

Father Aadhar no.:

Name of the Mother:

Mother Aadhar No:

**Ragging is prohibited in this institution. The rules framed under "A.P. Prohibition of Ragging Act, 1997" will be implemented against all those who violate the Act and Rules.**

**DECLARATION BY THE CANDIDATE**

I declare that all the above particulars are true and correct. Should any information given above is proved false at a later date, I agree to forfeit my admission. I agree to abide by the rules and regulations of the College and University in force from time to time. Further, I agree to abide by the decisions of Management and Principal of the College in matters of my misconduct or misbehavior or breach of rules and I agree to take my TC and leave the College at any time if my progress or conduct is not found satisfactory to the College authorities.

Station :

Date :

**Signature of the Candidate**

**DECLARATION BY THE PARENT / GUARDIAN**

I certify that the particulars given by my son / daughter / ward are true and correct. I agree that my son / daughter / ward would forfeit admission if any information given above is proved to be false at a later date. I agree for / his / her admission into the College. I shall be responsible for the payment of all the fees and other charges due from his / her on account of his / her studies. I shall also hold myself responsible and compensate for any damages caused by my son / daughter / ward in the college. I shall be responsible for his / her good behaviour and I agree to abide by the decision of the College Authorities in all matters and shall withdraw him / her from the college if the authorities are not satisfied with his / her progress / conduct without any claims.

Station :

Date :

**Signature of the Parent / Guardian**

**TO BE FILLED IN BY THE OFFICE**

Received copies of the Following:

- (1) Marks Statement/GPA Statement
- 2) Provisional Certificate/Degree
- 3) Transfer Certificate
- 4) Migration Certificate (For those who are from other than Krishna University)
- 5) GPAT Score Card(If any),
- 6) PGECET Rank Card (If any) .

Checked the above information and found correct . Checked and found that the application is properly registered and is in order:

Date : \_\_\_\_\_ Initials of the Verifying Assistant \_\_\_\_\_ Initials of Manager \_\_\_\_\_

Date of the Interview : \_\_\_\_\_

Whether Selected : Yes / No  
in the interview

If wait listed , No. in : \_\_\_\_\_  
in the wait list

Initials of the Assistant \_\_\_\_\_ Initials of Manager \_\_\_\_\_

**A D M I T T E D**

Date :

Signature of the  
PRINCIPAL

**CHECK – LIST OF ENCLOSURES**

Candidate should submit Xerox copies of the following along with the application form. The originals shall be submitted at the time of Interview / admission. Indicate by √ mark in the bracket for copies submitted.

- 1. Marks Statements/GPA Statement of Qualifying examination ( )  
(all years)
- 2. Provisional Certificate / Degree ( )
- 3. Transfer Certificate ( )
- 4. Migration Certificate (Wherever applicable) ( )
- 5. GPAT SCORE CARD (if any) ( )
- 6. PGECET Rank Card (if any) ( )

**KVSR SIDDHARTHA COLLEGE OF PHARMACEUTICAL SCIENCES, VIJAYAWADA-10**  
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(UNDERTAKING GIVEN BY THE CANDIDATES PROVISIONALLY SELECTED FOR ADMISSION INTO M.PHARM)

I, Mr/Miss \_\_\_\_\_ Son/ Daughter of Sri \_\_\_\_\_ hereby affirm that, I shall scrupulously adhere to the rules of conduct being in force at the Institution. I would not take up or participate in any activity that would be detrimental to the prestige of the college and the University.

Further I agree to abide by the rules as specified below and as instructed to by form time to time during the course of my study.

**Rules & Regulations:**

1. Students of Siddhartha College of Pharmaceutical Sciences are not permitted to resort to strikes and demonstrations within the college. Participation in any such activities shall automatically result in dismissal from the College.
2. No Student Unions except professional Associations are permitted in the College.
3. The College premises should be kept clean, Writing, Sticking up of posters and notices on the building walls is strictly prohibited.
4. Any student responsible for bringing outsiders into the college campus for settling students' disputes will be sent out of the college.
5. Smoking, Consumption of alcoholic drinks, playing cards, gambling any kind is prohibited within the college premises.
6. If a student wants to leave the College in the middle of the course, he should pay of Tuition Fee for the remaining years of study that he would have paid, had he continued in the College till the end of the Course.
7. My Admission is purely provisional. Should any certificate/ information basing upon which my admission is provisionally made proved to be false, I agree to forfeit my admission.

*Signature of Candidate*

*Signature of the parent*