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Dr. Vithalrao Vikhe Patil Foundation's

**COLLEGE OF PHARMACY, AHMEDNAGAR**

Vilad Ghat, P.O. M.I.D.C., Ahmednagar – 414 111 (M.S.)

[Approved by: AICTE, PCI New Delhi & Affiliated to SPPU, Pune]

Accredited by NAAC with Grade B (CGPA 2.72)

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**APPLICATION FOR PROVISIONAL ADMISSION TO F.Y./DIRECT S.Y. B.PHARMACY  
STUDENTS YEAR 20 - 20**

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1. Name of the student (in BLOCK Letters beginning with Surname) -----
2. Date of Birth (in figure) -----  
(In words) -----
3. Category (OPEN/ OBC/ SC/ ST /DT/ NT/ SBC) -----
4. Address for Correspondence -----  
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5. Admission whether in E.B.C./ Average / OMS Seats -----
6. Parent's/ Guardian's
  - (a) Full Name -----
  - (b) Occupation -----
  - (c) Permanent Address -----
  - (d) Office address (if any) -----
  - (e) Phone Number -----
7. Local Guardian's
  - (a) Full Name -----
  - (b) Occupation -----
  - (c) Permanent Address -----

(d) Office address (if any) -----

(e) Phone Number -----

8. Name of Institution last attended -----

Dist-----State-----

9. A) Marks obtained at MHT-CET ----- / 20

B) Details of Examination:

Maximum Marks	SSC or equivalent Grand Total	HSC equivalent Grand Total	Marks obtained at H.S.C. or equivalent exam.				
			Bio.	Phy.	Chem.	Maths.	Total PCB/PCM
			100	100	100	100	300
Marks Obtained							
Month & Year of Passing			Marks obtained at D. Pharm. Examination and Year of Passing / 1000 /				

C) Name & Address of the Institution from where Std. X and Std. XII examination have been passed

SSC (X <sup>th</sup> Std.)
HSC (XII <sup>th</sup> Std.)

Date :

Place :

(Signature of the Student )