

# PRINCETON COLLEGE OF PHARMACY

(Affiliated to JNTUH & Approved by AICTE, PCI, New Delhi)

Chowdary Guda, Korremula Village, Ghatkesar Mandal, Medchal-Malkajgiri District-Telangana.

Ph : 08415-200326, 7396216843, 9000611217

Application Form No.



Student  
Photo

Course	<input type="text"/>	Group	<input type="text"/>	Hall Ticket No.	<input type="text"/>
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## ❖ PERSONAL DETAILS

1. Student Name	<input type="text"/>		
2. Father Name	<input type="text"/>		
3. Mother Name	<input type="text"/>		
4. Date of Birth	<input type="text"/>		
5. Caste	<input type="text"/>	Subcaste	<input type="text"/>
6. Nationality	<input type="text"/>	Religion	<input type="text"/>
		Mother Tongue	<input type="text"/>
7. Admission Date	<input type="text"/>	Admission Number	<input type="text"/>

## ❖ ADDRESS

1. Address for Communication

## ❖ PRESENT ADDRESS

H.No.	<input type="text"/>
Street	<input type="text"/>
City	<input type="text"/>
Dist.	<input type="text"/>
Pin	<input type="text"/>
e-mail	<input type="text"/>

\*Applicable if necessary

\*\* Please mention any four

	Number	Relation
Cont 1:	<input type="text"/>	<input type="text"/>
Cont 2:	<input type="text"/>	<input type="text"/>
Cont 3:	<input type="text"/>	<input type="text"/>



## 2. Permanent Address

H.No.			
Street			
City			
Dist.			
Pin		Tel.	
e-mail			

Cont 1:

Cont 2:

## ❖ EDUCATIONAL DETAILS

Sl.No.	Course	Name of Institution	Address	Board / Univ.	Year	Medium
1	SSC					
2	INTER					
3	DIPLOMA					
4	DEGREE					
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						

❖ **LAST EXAMINATION DETAILS : SSC / INTER / DEGREE**

Board / Univ.	H.T.No.	Marks	Division*	Medium	Year of Passing	Remarks**

❖ **PARENTAL DETAILS**

	Name	Occupation	Office address	Income	Place of Birth
Father					
Mother					
Guardian***					

❖ **WHO SHOULD WE CONTACT IN CASE OF EMERGENCY ?**

Name

Relationship

Contact

❖ **MARKS OF IDENTIFICATION**

1.	
2.	

❖ **HOW DO YOU KNOW ABOUT OUR COLLEGE?**

- ☐ Paper add
- ☐ Hordings / Adv. on busess
- ☐ Consultancy if (yes) Name \_\_\_\_\_, Contact \_\_\_\_\_
- ☐ Old students / student relation \_\_\_\_\_
- ☐ Faculty Relation \_\_\_\_\_

\* Please mention I for 1st division, II for 2nd division, III for 3rd division, P for Pass division and C for Compartmental pass.

\*\* Please mention Rank / Medals / Distinction percentage, if any in preceding examinations.

\*\*\* Mention relationship with guardian



### ❖ FEE PARTICULARS

TUITION FEE : \_\_\_\_\_  
SPECIAL FEE : \_\_\_\_\_  
HOSTEL FEE : \_\_\_\_\_  
TOTAL FEE : \_\_\_\_\_

### ❖ INSTALMENT DETAILS

1<sup>st</sup> Term \_\_\_\_\_ 2<sup>nd</sup> Term \_\_\_\_\_  
3<sup>rd</sup> Term \_\_\_\_\_ 4<sup>th</sup> Term \_\_\_\_\_

### ❖ DECLARATION BY STUDENT

I hereby confirm that the above furnished information is true to the best of my knowledge and belief and if found wrong I will forfeit my admission. Further, I will abide by all the rules and regulations of the college framed from time to time also declare that I will not indulge in any activities in any manner which are detrimental to the objectives of the college in particular and the society at large.

I will clear all my dues on or before payment of examination Fee & I will put up 75% of attendance to sit for external examination.

SIGNATURE

### ❖ DECLARATION BY PARENT

I hereby confirm that the above furnished information by my ward is true to the best of my knowledge and belief and if found wrong I understand that my ward will forfeit his/her admission. Further, I undertake that I will direct my ward to abide by all the rules and regulations framed from time to time and I shall be responsible for the payment of all fees and charges and the good conduct and behaviour of my ward during the period of his/her term at the college.

SIGNATURE

### ❖ OFFICE USE

Admission

Confirmed

Rejected

PRINCIPAL