

APPLICATION NO WORLD COLLEGE OF PHARMACEUTICAL SCIENCES

Approved by : Pharmacy Council of India, New Delhi & Haryana State Board of Technical Education Address : Village - Gurawar, Jhajjar – Sampla Road, NH – 334(B), Jhajjar, Haryana - 124103 Web: www.worldpharmacycollegejhajjar.com

ADMISSION FORM - SESSION : 2023-24

C	ourse : B. Pharmacy : D. Pharmacy : To be filled by the student in Capital letters only	Please Paste your Current Passport size Photograph duly attested.						
1.	First Name Middle Name(s)	Last Name						
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2.	Date of BirthDD/MM/YYYY 3. Gender M	F						
4.	Father's Name Occupation							
	Father's Mobile No Email							
	Father's WhatsApp No							
5.	Mother's Name Occupation							
	Mother's Mobile No Email							
6.	Nationality							
8.	Category General OBC SC/ST Others							
9.	Permanent Address							
	PIN							
10.	Present Address (if different from above)							
	PIN							
11.	Local guardian's particulars, if any							
	Guardian's Name M	ob						

12. Educational Qualification

Exam Passed	Year	Board/Univ.	Roll No.	Subjects	% AGE Marks
10th					
12 th (Science) PCM					
12 th (Science) PCB/PCMB					

PLEDGE BY THE STUDENT

I declare that all entries made by me in this form and documents submitted in support of the information furnished are true in all respects and in case, any information or document is found to be false, it shall entail automatic cancellation of my admission, besides rendering me liable to such action as the College/University may deem proper. I will also not claim refund of fee in case my admission is cancelled. I hereby undertake that I will abide by all rules and regulations of the College/University and all instructions issued from time to time regarding discipline and conduct in the college. I shall obey all laws of the College/University and shall abide by my Teachers. I shall not participate in any indiscipline/violence/infighting in the College/University. If any complaint of indiscipline or misbehavior is found against me, the College/University Authorities will have every right to impose fine and punish me. I shall have no objection, if the College/University Authorities rusticate me from the College/University.

Date.....

Signature of Student

PLEDGE BY PARENT/GUARDIAN

I pledge to pay all the College/University dues of my son/daughter. My son/daughter will involve himself/herself in studies obeying all the rules and regulations and will maintain discipline. He/She will not indulge in any such activity, which may adversely affect the discipline, dignity or honour of the College/University. If any punishment is given for such type of action, I shall accept that. I further pledge that I shall be responsible for the conduct my son/daughter in the college. He/She will wear simple and descent clothes and will observe the prescribed dress code in the College/University.

Date.....

Signature of Parent/Guardian

Documents Enclosed (Self Attested Photocopies) :

- 1. Proof of Age/10th Certificate : Yes/No
- 2. 10th Mark Sheet : Yes/No
- 3. 12th Certificate : Yes/No
- 4. 12th Mark Sheet : Yes/No
- 5. Character Certificate : Yes/No
- 6. Proof of Residence : Yes/No (Aadhar Card/Voter Card)

7.	Category Certificate	: Yes/No
	(SC/BCA/BCB/ESM)	
8.	Certificate of Medical Fitness	: Yes/No
9.	Passport size color photo- 5	: Yes/No