B. FORMA (I Year)

Form Fee : Rs. 500/-



## R.D.S. College of Pharmacy

No.: B

Village - Kushaow, Post-Bhaupur, Distt. - Jaunpur - 222136 (UP) Mobile : 9956808612, 7905559409, 9628362187

Email: rdspharmacycollege@gmail.com Web.: www.rdspharmacy.com

Sir, I hereby apply for registr for the sessionper U.P. Govt. / AKTU / 0	1947	RMA (I Year) y please be conside	red if any seat is avail	able as	(Affix your self attested recent photograph)			
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Educational Qualifica	tion (Attach Photocopies of	Mark Sheets and	Pass certificates)					
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Intermediate (10+2)								
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Aadhar No.
Bank Account Details :
Bank Name :
Account No. : IFSC Code :
PCB/PCM % in Intermediate Physics Chemistry Math English  (Attach Photocopy of Marksheet)
Accomodation (Hostel):  Required Not Required
Transport:  Required Not Required
DECLARATION  I hereby declare that all the information given by me in this form is correct to the best of my knowledge and belief. I understand and agree that misrepresentation or omission of facts will justify the denial of admission, cancellation of admission or expulsion.
Date
FOR OFFICE USE ONLY Reference

Admission Approved by Chief Admin. Officer

Form Fee : Rs. 500/-

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Any Other																				

Aadhar No.
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PCB/PCM % in Intermediate
Physics Chemistry Math English
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Accomodation (Hostel) :
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