



# Application for B.Pharm Programme 2015

[illegible]

**2 Father's Name:**

[illegible]

4 Date of Birth:   (DD)   (MM)     (YYYY)

5 Sex: Male: ☐ Female: ☐

6. Caste: a) General ☐ b) SC ☐ c) ST ☐ d) \*OBC (OBC candidates of Jharkhand State only, please see note below) ☐

\*Note: (The candidates must have passed their Class 12 / qualifying exam from Jharkhand and should be BC-I / BC-II category of Jharkhand only)

7. Other Category: (a) Person with Disability [PwD] ☐ (b) Kashmiri Migrant ☐

8. State of Eligibility: \_\_\_\_\_ (Please write appropriate state from where you have passed Class 12 / equivalent qualifying examination)

9. JEE (Main) 2015 Roll No. \_\_\_\_\_ JEE (Main) 2015 Score: \_\_\_\_\_  
[total marks obtained]

10. AIPMT 2015 Roll No. \_\_\_\_\_ AIPMT 2015 Score: \_\_\_\_\_  
[total marks obtained]

**11. Educational record:**

Examination	Board/University	Year of passing	Percentage of Marks@	No of attempts\$	Subjects^
Class 10 / Matriculation					
Class 12 / ..... (Write name of Exam)					

**12. School / College from which you have completed Class 12 (Qualifying Examination)**

QUALIFICATION (I.Sc. / I.A. / I.Com. etc.)	NAME OF SCHOOL / COLLEGE	ADDRESS OF SCHOOL / COLLEGE WITH TELEPHONE NUMBER

**Instructions:**

- Read web notification (on website in pdf) before filling form. Use capital letters, numbers or tick (✓) box as required.
  - Enclose photocopies of marksheets of Class 10, Class 12 (if available), JEE (Main) 2015 / AIPMT 2015 admit card and score card (if applicable), and Caste / Special Category certificates. Write Name, Programme applying for and telephone number on the back of these papers.
- @ Percentage of Marks in Qualifying Exam: calculate as mentioned in Eligibility Criteria
- \$ Write 1 if passed in one attempt, 2 if in two attempts, etc.
- ^Use abbreviations –Phys, Chem, Math, Stat, Eng, etc.

**For Office use only**

Eligible ☐Not Eligible ☐

In case ineligible, please specify reasons: \_\_\_\_\_

Name &amp; Signature of verifying Faculty / Staff

13. Address for communication including your full name and photograph:

<b>Address for communication (should be valid till Dec 2015)</b>		Paste recent colour photograph here.  Cut to fit if needed Do not staple or fix with pin. Do not get the photograph attested
Name: _____ _____ _____		
City _____ Pincode _____		
STD Code _____ Telephone Number _____ Mobile Number _____		
		Signature

14. Permanent Address: \_\_\_\_\_

\_\_\_\_\_ City \_\_\_\_\_ Pin code \_\_\_\_\_

STD Code \_\_\_\_\_ Telephone Number \_\_\_\_\_ E-mail id: \_\_\_\_\_

15. **Details of DD taken for Rs.2,500/- (General / OBC) Rs.1,500/- (for SC/ST) candidates (non-refundable):**

Name of issuing Bank	Place of issuing Bank	Demand Draft Number	Demand Draft Date

16. **Declaration:** I hereby declare that all the information given by me in this application is true and correct to the best of my knowledge and belief. I also note that if any of the above statements are found to be incorrect or false or any information or particulars have been suppressed or omitted there from, I am liable to be disqualified. If selected my admission will be liable to be cancelled without notice or compensation in lieu of notice. I have read and understood the contents of the web notification for B.Pharm Programme 2015.

I hereby permit / do not permit (delete one) the Institute to use, display or transfer any of the details furnished by me in this form for any other purpose, except for complying with the admission formalities.

Signature of Candidate: \_\_\_\_\_ Date: \_\_\_\_\_

**17. Undertaking by the Candidate:**

I will comply with the University's rules, standards and instructions for student behaviour as notified from time to time. I hereby waive and release all claims against the University agents at a time when I am not under the direct supervision of the University or its agents or arising out of my failure to remain under such supervision or to comply with such rules, standards and instructions, and I agree to indemnify the University and its agents against any consequences thereof. I agree that the University shall have the right to enforce appropriate standards of conduct and that it may at any time terminate my participation in the University's program for failure to maintain these standards or for any actions or conduct which the University considers to be incompatible with the interest, harmony, comfort and welfare of other students. If my participation is terminated, I give my consent to being sent home at my own (or my parent's) expense with no refund of fees.

All references in the agreement and release to the University and its agents shall include the University Vice Chancellor, and all its Officers, Deans, Staff members, Chaperones, Group leaders, Employees, agents. All reference herein to the parents of the applicant shall include the legal guardian or other adult responsible for the applicant. I agree that in case of any legal dispute concerning admission procedures, the same shall be subject to exclusive jurisdiction of Courts at Ranchi.

This agreement shall take effect from the time I am accepted by and confirmed in enrollment in the University.

Signature of Candidate: \_\_\_\_\_ Date: \_\_\_\_\_ Place: \_\_\_\_\_

**18. Declaration by the Parent / guardian:**

I certify that I am the parent or legal guardian of the above applicant and that I have read the foregoing Agreement and release (including such parts as may pertain to personal financial responsibility) and hereby relinquish any claim that I might have against the Universities or its agents (as set forth above), both in my own behalf and my capacity as legal representative of the applicant, including without limitation any claim arising as a result of the applicant leaving the supervision of the University. I hereby guarantee to the University payment of all fees and other sums due at any time to the University by the applicant. I agree that in case of any legal dispute concerning admission procedures, the same shall be subject to exclusive Jurisdiction of Courts at Ranchi.

Signature of Parent / Legal Guardian \_\_\_\_\_ Date: \_\_\_\_\_ Place: \_\_\_\_\_

Occupation of Signatory: \_\_\_\_\_ Relationship with the candidate: \_\_\_\_\_

### **List of Enclosures to be submitted along with the completed application form**

1. Two recent colour photographs - one pasted on form and one attached by clip (write your Name and 'B.Pharm 2015, on the back of the second photo).
2. Crossed demand draft for Rs.2,500/- (General/OBC) and Rs.1,500/- (SC/ST) candidates (non-refundable) in favour of **"Birla Institute of Technology"**, payable at **Ranchi** (write your Name, telephone / mobile number and 'B.Pharm 2015, on the back of the DD).
3. Photocopies of following documents and certificates (write your Name, telephone / mobile number and 'B.Pharm 2015', on the back of each of these papers):
  - a) Pass certificate of Class 10
  - b) Marksheet of Class 10
  - c) Marksheet of Class 12 / Intermediate or equivalent
  - d) Admit Card of JEE (Main) 2015 / AIPMT 2015
  - e) Score Card of JEE (Main) 2015 / AIPMT 2015
  - f) Caste certificate (if applicable), which **should be in proper format and signed by appropriate authority of rank not less than SDO.**
  - g) Candidates belonging to other special category [Person with Disability / Kashmiri Migrant] must provide photocopy of certificate in proper format from appropriate authority.
  - h) Photo identification: (Driving license, Passport, PAN Card, Voter ID, College ID, Employee Identification Card are acceptable).

**Incomplete applications or applications received without all required enclosures are liable to be rejected / may not be processed.**