Viswanadha Institute of Pharmaceutical Sciences (VNIPS), Mindivanipalem(V) Sontyam(P) Anandapuram (M)Visakhapatnam(Dist)531 173.

APPLICATION FORM FOR B.PHARM AND PHARM.D

1.	NAME OF THE CANDIDAT (As per 10th Class)	`E :			A FEW YOUR
2.	GENDER :	MALE/ FEMALE			AFFIX YOUR RECENT PHOTOGRAPH
3.	FATHER'S NAME :				THOTOGRAFTI
4.	(As per 10th Class) MOTHER'S NAME	:			
5	(As per 10th Class) OCCUPATION:				
	Of the Father				
6.	ANNUAL INCOME	:			
7.	DATE OF BIRTH				
8.	PRESENT ADDRESS :				
			_		
9.	PERMANENT ADDRESS:_				
10	. TELEPHONE No.	: FATHER :		MOTHER	:
		GAURDIAN :		STUDEN	Т:
11	. E- Mail Id	:			
	Father	:			
	Student	:			
	. TENTH Regd.No. eg./Supl)	:	Year of Pass		

12.EAMCET/ RANK :	I	H.T.No	
13 CATEGORY (OC/BC/SC/ST/I	EBC)Caste:	Sub	Caste:
11. FEE PARTICULARS :	FEE EXEMP	TED/NOT EXE	MPTED
12. COURSE OF ADMISSION	:		
13. BANK ACCOUNT NUMBER 8	⅓ BRANCH :	;	
14. AADHAR CARD No	:		
15. IS PHYSICALLY HANDICAPEI	D :		
16. HOME/HOSTEL	:		
17.Seat Type (convener/convener	full/manage	ment/spot) :	
18.Admission No	:		
19.Date Of Admission(DD/MM/Y	YYY) :	; ;	
20.Roll No	:	:	
21.SSC Max Marks	:	:	
22.SSC Obtained Marks	:	<u>'</u>	
23.SSC School	:	:	
24.SSC Board	:		
25.SSC Medium	:		
26.Inter HTNo	:	:	
27.Inter Max Marks	:	:	
28.Inter Obtained Marks	:	:	
29.Inter College	:	:	
30.Inter Medium	:		
31.Inter Board	:	:	
32.Inter YOP			
33.Mother occupation	:	:	
34.Mother Income	:		
35.Admission Status (Direct/La	teral) :		
36.Guardian Name	:		
37.Guardian Phone No	:	:	

38.Guardian Address					
39. Student Blood Group					
40.Religion	:				
41.Mother Tongue	:				
42.Scholarship (Yes/NO)					
43.TENTHGRADE (grade points only)	:				
44.INTERGRADE	:				
45.Ration Card No	:				
46. IDENTIFICATION MARKS : 1.					
(AS PER SSC CERTIFICATE 2.					

Place: Date:

Signature of the Candidate

Signature of the Parent/ Guardian Signature of the Principal