



S.S. COLLEGE OF PHARMACY

#72&73, 3rd Cross, Amruthahalli, Yelahanka Hobli, Bengaluru - 560 092. M: 93411 31798/82178 90441 | E-mail : sscollegeofpharmacy@gmail.com

Application No.: 484

Application for Admission to **Diploma in Pharmacy Course** Batch: 20 - 20

Part - 1

Passport Photo

To, The Principal S.S. College of Pharmacy, Bengaluru - 560 092.

Sir,

No.

- I) I the undersigned seek admission to the Diploma in Pharmacy Part-1 in your Institution. If admitted, I agree to bound by the rules and regulations in force as well as those that may be framed in future by the Institution.
- II) I give below the necessary particulars & undertake that so long as I am the Student of the Institution, I will not interfere with its disciplinary actions.
- III) I have attached the following Original documents;
 - 1. SSLC / 10th Marks Card.
 - 2. Statement of marks of PUC II Year / Intermediate Science Examination.
 - 3. School Leaving / Transfer Certificate.
 - 4. Character Certificate from the Head of the Institution last attended.
 - 5. Physical Fitness Certificate.
 - 6. Passport Photographs.
 - 7. ID Proof

1. Candidate Name in full	(Block Letters	5)		
2. Fathers Name				
3. Permanent Address				
4. Local Address			5.400.00	
5. Date & Place of Birth	Date	Place	District	State
6. Nationality etc.		Indian 🔲	Others	
7. Marital Status		Married	Un Married	
8. Languages known	English Hindi Kannada	Read	Write	Speak

(P.T.O)



9. Annual Income o			Ti	rban R	ural 🔲	
10. State whether fi			0	To an _		
11. Last School / Co (Specify the Nat	ollege Attended me)	1	1070			
12. Religion & Cast	te	GEN [OBC 🔲	SC/ST Ot	hers	
13. Academic Infor	mation	THE REAL PROPERTY.	Philips:		The second second	Name of
Examinations	Reg. No.	Year of Passing	Marks Obtained	Total Percentage	Percentage of marks PCM/PCB Marks	University/ Board
P.U.C. Sc.						17-17-1
Others						
11/4 51/5						
Pate:					Signature of	the Applicant
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