SESHACHALA COLLEGE OF PHARMACY

PUTTUR-517583

STUDENT FULL DETAILS APPLICATION FORM

Reg No. : ☐☐☐☐☐☐☐☐☐☐☐   **Admn No. :** ☐☐☐☐

Name of the student:
(As per SSC certificate)

Name of the father:

Name of the mother:

Date of birth: ☐ / ☐ / ☐

Religion: Hindu/ Muslim / Christian

Caste Category: OC / BC (A, B, C, D, E) / SC / ST

SUBCASTE:

Residential address: _____
_____
_____
_____

Pin code: ☐☐☐☐☐☐

Permanent address: _____
_____
_____
_____

Pin code: ☐☐☐☐☐☐

+91 ☐☐☐☐☐☐☐☐☐☐

Student contact Phone No. :

Parent contact Phone No. : +91 | | | | | | | | | | |

Email ID: _____

Ration Card No.: | | | | | | | | | | | | | | | |

Aadhar card details:

Sl No.	Relationship	Name	Aadhar Card No.												
1	Student														
2	Father														
3	Mother														

EDUCATIONAL DETAILS:

Sl No.	Qualification	Hall ticket No.	Year of Passing	Marks obtained	Percentage / Rank
1	SSC				
2	INTERMEDIATE				
3	EAMCET / ECET				
4	PGECET				

ENCLOSURES:

1. Allotment order
2. EAMCET Hall ticket No. and Rank card.
3. SSC marks sheet.
4. Intermediate marks sheet.
5. Intermediate transfer certificate.
6. Caste certificate.
7. Income certificate.
8. Ration card.
9. Aadhar card (student, father, and mother).
10. Passport size photos (2 No's).
11. Study certificate VI to Inter & B.Pharmacy
12. Bank passbook (Student & Mother)

SIGNATURE OF THE CANDIDATE

(Prepared by C N RAMESH & D GOWTHAM RAKESH)