

Shushruta Educational Trust ®

NARGUND COLLEGE OF PHARMACY

Approved by Govt.of Karnataka, All India Council for Technical Education,
Pharmacy Council of India,New Delhi

Dattatreyanagar, 2nd Main,100 Ft. Ring Road,
BSK 3rd Stage, Bangalore 560 085.
Tel : 2672064

Affix latest
Passport Size
Photograph

Application Form for Admission to M.Pharm Course

1. Name of the Candidate : _____

2. Name of the Parent / Guardian : _____

3. Present Address for Communication : _____

4. Permanent Address : _____

5. Telephone No. & Email ID : _____

6. Nationality : _____

7. Age & Date of Birth : _____

8. Religion & Caste : _____

9. Academic Particulars :

1. B.Pharm :

Result / Percentage : _____

10. List the Outstanding Performances (Academic and Extra-Curricular): _____

11. Details of Enclosures to be Attached with the Application Form

- a) 10th Marks Card
- b) D.Pharm Part-I & Part-II Marks Card
- c) B.Pharm Marks cards
- d) Transfer Certificate
- e) Character Certificate
- f) Self Addressed Envelope
- g) Migration Certificate
- h) Five Passport Size and Two Stamp size Photographs of the Candidates

DECLARATION BY THE CANDIDATE AND PARENT / GUARDIAN

I hereby declare that the information given above is true and complete to the best of my knowledge. I hereby undertake to abide by all the conditions, rules and regulations in force and those enforced from time to time. I will not do anything unworthy of student of the college either inside or outside the College or anything that will interfere with its orderly working and discipline.

Candidate's Signature

Parent / Guardian's Signature

Place :

Date :