

BPMCO15

Admission No : 93132

1625120007

Geethanjali College of Pharmacy

Cheeryal (V) Keesara (M) Ranga Reddy District. Ph : 040-32449147

(Approved by AICTE, PCI New Delhi and Permanently Affiliated to JNTUH)

Sponsored by :

Teja Educational Society, Hyderabad.

Ph : 040-24221626, 24221662

REGISTRATION FORM FOR Pharmacy Programme 20 - 20

3. Pharmacy / M. Pharm / Pharm. D / Pharm. D (PB) **Pharmaceutics** **Pharmaceutical Analysis & Quality Assurance** **Pharmaceutical Management & Regulatory Affairs**

Please read carefully the instructions given in the prospectus before filling the form.

Incomplete applications without necessary documents are liable to be rejected

★ Marked fields should compulsorily be filled.



Name of the Candidate (as per SSC Certificate) : **Chitarla Bhanu Sri**

Sex : Male Female ★Blood Group

Name of Father / Guardian (as per SSC Certificate) : **Chitarla Ramesh Goud**

Occupation of Father / Guardian : **Business** E-mail ID **BhanuSriChitarla@gmail.com**

Date of Birth : DATE **24** MONTH **03** YEAR **1999**

Religion : **Hindu** ★Year of Passing of 10+2 **1628246388** ^{Year of Passing} **2015-16**

Social Status / Reservation (OC ; Girls ; Physical Handicapped; BC-A,B,C,D; SC-A,B,C,D; ST; Others) : **Bc-B** ★10+2 Board Registration No.

Entrance Hall Ticket No : **1605755** ★Percentage of marks in 10+2

Entrance Rank : **106678** ★Student E-mail **BhanuSriChitarla@gmail.com**

Address for communication with pin code :

Present Address

H. No. :	1-53					
Street Name :	Ward no. 1					
Village :	Keesara					
Mandal :	Keesara					
Dist. :	Ranga Reddy					
Phone No. of Parent / Guardian	Land Line :		Mobile : 9391127734			
Pincode	5	0	1	3	0	1

Student Mobile No. :

Permanent Address

H. No. :	1-53					
Street Name :	Ward no. 1					
Village :	Keesara					
Mandal :	Keesara					
Dist. :	Ranga Reddy					
Phone No. of Parent / Guardian	Land Line :		Mobile : 9391127734			
Pincode	5	0	1	3	0	1

**PRINCIPAL**Geethanjali College of Pharmacy
Cheeryal (V), Keesara (M), Medchal Dist. T.S.-501301.

11) Mother Tongue :

Telugu

12) Monthly Income of Parent / Guardian :

82000.00

13) School & Colleges where last studied :

	Name of the Institution	Years of Study	Class / Division	% Marks	Medium
A) S.S.C	Serenity model high School	2014	$\frac{1}{1} - \frac{X}{X}$	7.8	English.
B) Inter	Vaishnavi junior School	2015-16	$\frac{1}{1}^{st} \& \frac{1}{1}^{nd}$ year.	637	English.
C) Degree					

14) Extra curricular activities :

(Particulars of Literary Competitions, Debates, Social Services etc.) Certificates if any, from the Head of the Institution are to be attached

No

15) In which games, sports and other extra curricular activities are you interested?

(Furnish Details)

No

16) Are you resident of T.S. (if not mention the state to which you belong)

Yes

★17) Identification Marks



1. A mole on the chin
2. *[Signature]*

PRINCIPAL

Geethanjali College of Pharmacy
Cheerl(V), Keesara(M), Medchal Dist. T.S.-501301

Declaration by the Student

I do hereby solemnly state that I had carefully read through the rules and regulations stipulated by the college in the prospectus and I agree to abide by them. In case if I violate any of the conduct, discipline, attendance etc. I understand that I am liable for punishment. I solemnly affirm that I will not indulge in any act of indiscipline, ragging, strikes and other such activities. In case of any misbehaviour on my part I may be expelled from the institution and the Principal / Correspondent may cancel my admission without any prior intimation.

Your's Obediently,

Date: 02/8/16

Ch. Bharu Sri
Signature of the Student

Undertaking by the Parent / Guardian

The Principal / Management
Geethanjali College of Pharmacy
Cheeryal, Keesara (M), Ranga Reddy Dist.

..... *Chitharla Ramesh Goud* Parent / Guardian of
ss / Mr *Chitharla Bharu Sri* hereby assure

that I will be held personally responsible for payment of college fees and other fees of my ward. In case my ward discontinues studies at this college for whatever reason, we will pay the full amount of tuition fees that my ward would have paid, had he / she continued the course upto completion.

I further declare that my ward would abide by the rules and regulations of the college with respect to discipline, code of conduct, attendance and attainment of standards. I also agree that it will be to the absolute discretion of the college authorities to cancel the admission of my ward at any time if they find that my ward has violated the rules of discipline, conduct, attendance or academic performance.

I further promise to extend full co-operation to the staff by encouraging from time to time, regarding the performance of my ward and monitor her / his progress at home.

Thanking you

Date: 02/8/16



Ch. Bharu Sri

PRINCIPAL
Geethanjali College of Pharmacy
Cheeryal(V), Keesara(M), Medchal Dist. T.S.-501301.

Ch. Bharu Sri
Your's Sincerely,

Signature of the Parent / Guardian

FOR OFFICE USE

ORIGINAL AND ONE SET OF PHOTOSTAT COPIES OF THE CERTIFICATES TO BE ENCLOSED

CHECK LIST :

- | | |
|--|-------------------------------------|
| 1) Memorandum of Marks (X, Inter, Degree) | <input checked="" type="checkbox"/> |
| 2) Transfer Certificate | <input checked="" type="checkbox"/> |
| 3) Bonafide Certificate | <input checked="" type="checkbox"/> |
| 4) Caste Certificate | <input checked="" type="checkbox"/> |
| 5) Migration Certificate | <input type="checkbox"/> |
| 6) Income Certificate of Parent / Guardian | <input type="checkbox"/> |
| 7) Six Photographs | <input checked="" type="checkbox"/> |
| 8) Provisional Certificate | <input type="checkbox"/> |

Verified by :

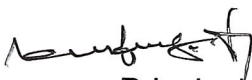

1) Admission section

2) General Administration




PRINCIPAL
Geethanjali College of Pharmacy
Cheeryal(V), Keesara(M), Medchal Dist. T.S.-501301




Principal
PRINCIPAL
Geethanjali College of Pharmacy
Cheeryal(V), Keesara(M), Medchal Dist. T.S.-501301

Note : Students should keep sufficient number of Photostat copies of original certificates with them before submitting the originals at the time of admission. Originals submitted will be returned only after verification.