No:



# ANNAMACHARYA COLLEGE OF PHARMACY

NEW BOYANAPALLI - 516 126, RAJAMPET, KADAPA DIST, A.P., Ph: 08565 - 251865/67/68

Accredited by NAAC with "A" Grade Bangalore, Accredited by NBA (UG Programme), New Delhi Recognized u/s 2(f) & 12(B) of the UGC Act, 1956, New Delhi, Recognized Research Center, JNTUA, Ananthapuramu, Recognized by Govt. of. A.P., Hyderabad, Affiliated to JNTUA, Anantapuramu, Approved by AICTE & PCI, New Delhi.

Sponsored by ANNAMACHARYA EDUCATIONAL TRUST, RAJAMPET

## Application form for Admission under 'B' Category into

B.Pharmacy/Pharm.D / M.Pharmacy/Pharm.D (PB)

for the Academic Year: 2020-21

|   | Block Letters: of Birth & A   | As per SSC)                      | Blood Group: |            |                                  |
|---|---|----------------------------------|--------------|------------|----------------------------------|
|   |   | ligion :                         | _            |            | A CC' D                          |
| Motl                                      | her's Name: .   |                                  |              |            | Affix Passport<br>ize Photograph |
| Fath                                      | er's Name:  |                                  |              |            |                                  |
| Occu                                      | ıpation:  | •••••                            | ••••         |            |                                  |
| & Fa                                      | amily Annual  | Income: Rs.                      |              |            |                                  |
| (a) <b>Pe</b>                             | rmanent Add   | lress :                          |              |            |                                  |
| ••••                                      |   | •••••                            |              |            |                                  |
| ••••                                      |   | rrespondence                     |              |            |                                  |
| (c) <b>Tele</b>                           | <b>phone No.</b> (R   |                                  | (Off):       |            |                                  |
| (c) Tele                                  | <b>phone No.</b> (R   | des):(2)                         | (Off):       |            |                                  |
| (c) Tele                                  | phone No. (R<br>bile No: (1)<br>of Qualifying                                 | Les):(2)  Examination:           | (Off):(3)    | )          | Division                         |
| (c) Tele  Mol                             | phone No. (R<br>bile No: (1)<br>of Qualifying<br>Course                       | Les):(2)  Examination:           | (Off):(3)    | )          | Division                         |
| (c) Tele  Mol  Details of                 | phone No. (Rebile No: (1)of Qualifying Course                                 | Les):(2)  Examination:           | (Off):(3)    | )          | Division                         |
| (c) Tele  Mol  Details of                 | phone No. (R<br>bile No: (1)<br>of Qualifying<br>Course<br>S.S.C.<br>rmediate | Les):(2)  Examination:           | (Off):       | % of Marks | Division                         |
| (c) Tele  Mol  Details of  S  Inter  B.Pl | phone No. (R<br>bile No: (1)<br>of Qualifying<br>Course<br>S.S.C.<br>rmediate | Examination:  Board / University | (Off):       | % of Marks | Division                         |

| Course   | Order of Priority |
|--|-------------------|
| • B.Pharmacy   | 1.                |
| • Pharm.D  | 2.                |
| • Pharm.D (PB)   | 3.                |
| • M.Pharmacy   | 4.                |
| > 1. Pharmaceutics   | 5.                |
| <ul> <li>2. Pharmacology</li> <li>3. Pharmaceutical Chemistry</li> <li>4. P' Analysis &amp; Quality Assurance</li> </ul> | 6.                |
| ,  | 7.                |

## 11. Check list of Certificates to be Submitted to the College:

| S.No. | Certificate Name | Submitted | S.No. | Certificate Name   | Submitted |
|-------|------------------|-----------|-------|--------------------|-----------|
| 1.    | S.S.C.           |           | 7.    | T.C.               |           |
| 2.    | Intermediate     |           | 8.    | Study & Conduct    |           |
| 3.    | D.Pharmacy       |           | 9.    | Caste Certificate  |           |
| 4.    | B.Pharmacy       |           | 10.   | Income Certificate |           |
| 5.    | Rank Card        |           | 11.   | Photos - 8         |           |
| 6.    | Hall Ticket      |           | 12.   | Others if any      |           |

|  | 6.   | Hall Ticket                  |                 | 12.          | Others if any               |                  |
|--|--|------------------------------|-----------------|--------------|-----------------------------|------------------|
| <u>DECLARATION</u>                                   |  |                              |                 |              |                             |                  |
|  |  |                              |                 |              |                             |                  |
|  | I,   |                              |                 |              |                             |                  |
| Solemn   | ıly decla  | are that,                    |                 |              |                             |                  |
|  | All st   | atements made in the ap      | plication are   | true to th   | e best of my knowledge      | and belief. I    |
| clearly  | underst  | and that if any of the sta   | atements are    | subsequer    | itly found to be untrue,    | my admission     |
| stands   | cancelle   | d.                           |                 |              |                             |                  |
|  | I pron   | nise to abide by the rules a | and regulation  | ns, at prese | ent in force and those that | may hereafter    |
| be mad   | le for th  | ne administration of the in  | nstitution or a | affiliating  | university. I further und   | ertake that, so  |
| long as  | I rema   | in as a student of the inst  | itution I will  | not damaş    | ge anything either inside   | or outside the   |
| Institut   | ion that   | may interfere with its orde  | erly working a  | and discipl  | ine.                        |                  |
|  | I am   | aware that I should put      | in necessary    | percentag    | ge of attendance, otherw    | vise I shall be  |
| detaine  | d and I  | shall not indulge in raggin  | g and if I am   | involved I   | am liable to be punished.   | •                |
|  | I am   | aware that I have to pay a   | nnually an a    | mount of     | miscellaneous fee in add    | ition to tuition |
| fee and  | I am av  | ware that, if, I discontinue | my studies v    | vhatever b   | e the reason, I undertake   | to pay the full  |
| amount   | amount of fees that would have been paid by me, had I continued to study my course up to completion. |                              |                 |              |                             | to completion.   |
| Failing  | Failing to pay the fees, my original certificates and Transfer Certificate need not be issued to me. |                              |                 |              |                             |                  |
|  | In all matters concerning me and the Institution the orders of the officers concerned will be        |                              |                 |              |                             |                  |
| final and binding on me.                             |  |                              |                 |              |                             |                  |
| I have noted the subject Matter of this undertaking. |  |                              |                 |              |                             |                  |
| And m  | y ward v   | will comply with it.         |                 | Sign         | ature of the Candidate      |                  |
|  |  |                              |                 | Nam          | e :                         |                  |
| Signati  | Signature of the Parent/Guardian Address:  |                              |                 |              |                             |                  |
| Name:  | Name:  |                              |                 |              |                             |                  |

Date:

**Station:** 

# PROHIBITION OF RAGGING IN EDUCATIONAL INSTITUTIONS Act 26 of 1997

Ragging is an act which is likely to cause insult or annoyance or fear or apprehension or threat or intimidation of outrage of modesty or injury to students. Ragging is prohibited within or outside the educational institutions.

| Sl.<br>No. | Extent of offence   | Penalty  |
|------------|---|--|
| 1          | Teasing or embarrassing or humiliating a student  | Imprisonment upto 6 months or a fine upto Rs.1,000/- or both.                |
| 2          | Assault or use of criminal force or criminal intimidation.  | Imprisonment upto 1 year or<br>a fine upto Rs.2,000/-<br>or both             |
| 3          | Wrongful restraint or wrongful confinement or causing hurt.   | Imprisonment upto 2 years or a fine up Rs.5,000/- or both.                   |
| 4          | Causing grievous hurt or kidnapping or abducing or committing rape or committing unnatural offence. | Imprisonment upto 5 years with a fine upto Rs.10,000/-                       |
| 5          | Causing death or abetting suicide.  | Imprisonment for life or for a term upto 10 years with fine upto Rs.50,000/. |

#### Note:

- 1. A student convicted of any or the above offences, will be expelled from the College.
- 2. A Student imprisoned for more than six months for any of the above offences will not be admitted in any other college.
- 3. A Student against whom there is prima facie evidence of ragging in any form will be suspended from the college immediately

# PRINCIPAL ANNAMACHARYA COLLEGE OF PHARMACY

#### UNDERTAKING

We have noted the provisions of the Ragging Act and we are aware of serious consequences. We hereby solemnly promise that we shall do everything possible to eliminate this ragging menace from Annamacharya College of Pharmacy, within and outside college premises. We are aware that the students responsible for ragging are liable for any punishment including,

- 1. Cancellation of admission.
- 2. Suspension from attending classes.
- 3. Withholding/Withdrawing scholarship/fellowship and other benefits.
- 4. Debarring from appearing for any test/examination or other evaluation process. Withholding results.
- 5. Debarring from representing the Institution in any national or international meet, tournament, youth festival, etc.
- 6. Suspension, expulsion from the hostel.
- 7. Rustication from the Institution for periods varying from 1 to 2 academic years.
- 8. Expulsion from the Institution and consequent debarring from admission to any other Institution.
- 9. Fine up to Rs.50,000/-.
- 10. Rigorous imprisonment up to ten years (by Court of Law) etc.

A copy of this full page along with the undertaking is given to us for our record and for ready reference.

| Signature of the Student: | Signature of Parent: |
|---------------------------|----------------------|
| Name:                     | Name:                |
| Roll No:                  | Tel.(O)(R)           |
| Local Address:            | Address:             |

### **FOR OFFICE USE ONLY**

| NAME OF THE STUDENT | : |
|---------------------|---|
| COURSE & BRANCH     | : |
| ROLL NO             | : |

### **FEE PARTICULARS**

- 1. 1<sup>st</sup> year:
- 2. 2<sup>nd</sup> Year:
- 3. 3<sup>rd</sup> Year:
- 4. 4<sup>th</sup> Year:
- 5. 5<sup>th</sup> Year:
- 6. 6<sup>th</sup> Year:

**Description of Fee:** 

| S.No. | Particulars                 | Amount (Rs.) | Cash / D.D. |
|-------|-----------------------------|--------------|-------------|
| 1.    | Admission Fee               |              | D.D. No.:   |
| 2.    | Tuition Fee                 |              | Date :      |
| 3.    | J.N.T.U. Recognition Fee    |              | Bank:       |
| 4.    | J.N.T.U. Infrastructure Fee |              | Receipt No: |
| 5.    | Other Fees                  |              |             |
| TOTAL |                             |              |             |

ADMN. OFFICER PRINCIPAL SECRETARY

DATE:

**Note:** Admission is subject to Govt. of A.P.'s orders issued time to time & approvals from affiliating or approval authorities.