



# Bojjam Narasimhulu Pharmacy College for Women

Vinaynagar, Santoshnagar Crossroads, Saidabad, Hyderabad – 500 059, Telangana.

Phone: 040-2453 2171, 9959054005 Fax: 040-2453 7281, Email: principalbnpw@gmail.com, Website: www.bnpw.ac.in

## Application seeking admission to category 'A' left over seats (i.e. Spot Admissions) in B Pharmacy course for the academic year 2018-19

Received on _____ at _____
Registration No _____
Authorized Signatory
(to be filled-in by college)

Affix latest passport size colour photograph
--

- 1 Name of the Applicant  
(In block letters as per SSC) \_\_\_\_\_
- 2 Date of Birth (dd-mm-yyyy)  
(As per SSC) \_\_\_\_\_
- 3 Father's Name \_\_\_\_\_
- 4 Mother's Name \_\_\_\_\_
- 5 Address for Correspondence  
(with Pin Code) \_\_\_\_\_  
\_\_\_\_\_
- 6 Telephone (with STD code) \_\_\_\_\_
- 7 Cellphone number \_\_\_\_\_
- 8 Email Address \_\_\_\_\_
- 9 Rank in EAMCET-2018 \_\_\_\_\_
- 10 Total Marks in Intermediate (10+2) \_\_\_\_\_

### DECLARATION

We declare that all the foregoing statements made in this application are true. We accept that any statement made in this application, if found incorrect on scrutiny, will render the application liable for rejection. Admission, if granted on the basis of such incorrect information, will stand cancelled.

Signature of the Applicant

Signature of the Father / Mother / Guardian

\_\_\_\_\_  
(Name in block letters)

\_\_\_\_\_  
(Name in block letters)

- Enclosures:
1. SSC or its equivalent certificate (photocopy) for ascertaining date of birth
  2. EAMCET-2018 hall ticket (photocopy) and rank card (photocopy)
  3. Marks sheet of Intermediate (10+2) or its equivalent (photocopy)
  4. Study certificates(photocopy)

Note: Please bring two copies of this application (original and photocopy). Submit original copy, with enclosures, to the college and obtain acknowledgement on the photocopy with registration number.