



Shirpur Education Society's

# R. C. Patel Institute of Pharmacy

Karwand Naka, Shirpur Dist. Dhule – 425405

## Admission Form for D. Pharmacy

A.Y.2025-26

Student  
Photo

Form No. \_\_\_\_\_

Student Signature-> \_\_\_\_\_

### Personal Information:

	Surname	First Name	Middle Name
Name of Student			
Fathers Name			
Mother Name			

Date of Birth:     /     /

Place of Birth: \_\_\_\_\_

Type of Admission: CAP – I / II / III Or Institute Level (Management)

Fee Payment Type: General / Fee Concession

Category: SC / ST / VJ / DT / NT1 / NT2 / NT3 / NT4 / OBC / SBC / OPEN / TFWS [√]

Religion: \_\_\_\_\_ Caste: \_\_\_\_\_

Blood Group : \_\_\_\_\_ E-mail ID: \_\_\_\_\_@\_\_\_\_\_.com

Gender: Male  Female  Married Status: Yes  No  [√]

Aadhar No.																				
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Address: \_\_\_\_\_

\_\_\_\_\_ Tal: \_\_\_\_\_ Dist.: \_\_\_\_\_

Pin: \_\_\_\_\_ State: \_\_\_\_\_

Candidate's Mobile No.: \_\_\_\_\_ WhatsApp Mobile No: \_\_\_\_\_

Parent's Mobile No.: \_\_\_\_\_ WhatsApp Mobile No: \_\_\_\_\_

Application ID : \_\_\_\_\_ Password: \_\_\_\_\_

Marks Obtained in H.S.C.:     PCM \_\_\_\_\_     PCB \_\_\_\_\_

Occupation of the Guardian: Service / Business / Profession / Farmer / Laborer / Retired [√]

Annual Income of the Guardian: Rs.             /-

**Educational details:**

Name of Examination	Board / University	Year & Month of Passing	Exam. Seat No.	Mark sheet No.	Total Marks Obtained	Out of
SSC (10 <sup>th</sup> )						
<b>School Name:</b>						
HSC (12 <sup>th</sup> )						
<b>College Name:</b>						
Other Education						
<b>College Name:</b>						

**Attached Documents & Certificates:**

Sr. No.	Name of Document / Certificate	Tick	Remark
1	FC- Registration Copy & Freeze Letter (Pay Rs.1000/-)		
2	Aadhar Card Xerox		2 Xerox Copy
3	SSC Marksheet (10 <sup>th</sup> )		<b>&gt; Original Doc. Set</b>  <b>&gt; 1 Xerox Copy Set</b>  <b>With Self attested</b>
4	HSC Marksheet (12 <sup>th</sup> )		
5	Income Certificate (31-Mar-2026)		
6	Leaving Certificate (LC/TC)		
7	Caste Certificate		
8	Non-Creamy Layer Certificate 31-Mar-2026		
9	Caste Validity		
10	GAP Certificate <b>if applicable</b>		
11	Nationality Certificate		
12	Domicile Certificate		
13	Disability Candidates Certificate		
14	Defense Quota Candidate (Father Domicile)		
15	If other Course (All Marksheet)		

**Declaration by student & Guardian:**

I hereby declare that I have read the rules related to admission & the information filed in by me in this form is accurate & true to the best of my knowledge. I will be responsible for any discrepancy arising out of the form signed by me and I undertake that in absence of any documents final admission will not be granted and / or admission will stand cancel.

I am aware of the Maharashtra Prohibition of Ragging Act, 1999 and I State that I will abide by all the rules and regulations of the said Act.

**Signature of the Student**

I have permitted my son/daughter/ward to join your college. The information supplied by him/her is correct to the best of knowledge. I have acquainted myself with the rules and fees, due to my son/daughter/ward and to see that he/she observes.

**Place:****Date:** / /2025**Signature of the Guardian**