

# ADMISSION COMMITTEE FOR PROFESSIONAL COURSES

L. D. College of Engineering Campus, Ahmedabad-380 015. • Website : www.jacpcldce.ac.in



## APPLICATION FORM

### FOR ADMISSION IN B. PHARM. SEM. III COURSE AFTER DIPLOMA IN PHARMACY IN GUJARAT STATE (YEAR 2019)

(For office use only)

Registration No. :	<input type="text"/>	Merit Marks	<input type="text"/>
Date :	<input type="text"/>		
Marks in Diploma Part-II	<input type="text"/>	(Aggregate %) Merit No.	<input type="text"/>
College :	<input type="text"/>		
University :	<input type="text"/>	Category	<input type="text"/>

TO BE FILLED IN BY THE APPLICANT (IN CAPITAL LETTERS ONLY) :

1. Full Name of Applicant :

Surname :	<input type="text"/>
Name :	<input type="text"/>
Father's Name :	<input type="text"/>

Affix  
Passport Size  
Photograph  
Signed and  
Stamped by  
Principal or  
Head of Institute

2. Category :  Open  SC  ST  SEBC  Ex. Serviceman  Open-EWS  PH

3. TFWS :  Intrested  Not Intrested

(જે ઉમેદવારોને ટ્યૂશન ફી વેવર (TFWS) નો લાભ લેવા માંગતા હોય તેવા ઉમેદવારાની કુટુંબની ગત નાણાંકીય વર્ષની બધાજ સાધનો માંથી કુલ વાર્ષિક આવક રૂ. ૮ લાખ કે તેથી ઓછી હોવી જોઈએ અને તે માટે ગુજરાત સરકારશ્રીના સક્ષમ અધિકારી દ્વારા આપવામાં આવેલ આવકનું પ્રમાણપત્ર જમાં કરવાનું રહેશે.)

4. Postal Address :

4. Contact No.\* :  (with STD) • Mobile No.

5. Date of Birth :

6. DETAILS OF EDUCATIONAL PERFORMANCE :

[A] Standard XII / H.S.C.

[i] Name of School \_\_\_\_\_ [ii] Board \_\_\_\_\_

[iii] Month & Year of Passing \_\_\_\_\_ [iv] Attempts \_\_\_\_\_ [v] Seat No. \_\_\_\_\_

[vi] Theory Marks :

	Maths	Chemistry	Biology	Physics	Theory Total	% (upto 2 decimal digits) theory : Science Subjects
Obtained						
Out of						

[vii] Practical Marks :

	Chemistry	Biology	Physics	Practical Total	% (upto 2 decimal digits) Practical : Science Subjects
Obtained					
Out of					

Marks obtained in English \_\_\_\_\_ out of \_\_\_\_\_

### [B] Diploma Pharmacy, Part-I

[i] Name of College \_\_\_\_\_ [ii] University \_\_\_\_\_

[iii] Year of Passing \_\_\_\_\_ [iv] Attempts \_\_\_\_\_ [v] Seat No. \_\_\_\_\_

[vi] Theory Marks :

	P'ceutics-I	Pharm. Chem. I	P'cognocny	Bio. Chem. & Clin. Path.	Human Ana. Phy.	Helath Edu. & Comm. Pharm.
Internal						
External						
<b>Total</b>						

**Theory Grand Total : / out of 600**

### [C] Diploma Pharmacy, Part-II

[i] Name of College \_\_\_\_\_ [ii] University \_\_\_\_\_

[iii] Year of Passing \_\_\_\_\_ [iv] Attempts \_\_\_\_\_ [v] Seat No. \_\_\_\_\_

[vi] Theory Marks :

	P'ceutics-II	Pharm. Chem. II	P'cology & Toxicology	Pharm. Jurisp.	Drug Store Mngmt.	Hosp. Clin. Pharm.
Internal						
External						
<b>Total</b>						

**Theory Grand Total : / out of 600**

**Gross Grand Total (Incl. Pract.) / out of 1000**

### DECLARATION BY THE CANDIDATE

I hereby declare that all the particulars stated in the application are true and correct to the best of my knowledge and belief. I have read the notification No. GH/SH/19 /2013/PVS/102013/280/S dtd. 29/07/2013 and further amendments. I shall abide by the terms and conditions therein. In the event of suppression or distortion of any information provided in my application form, I understand that admission granted by **Admission Committee for Professional Courses, Ahmedabad, Gujarat** is liable for cancellation. I also understand that the decision of the **Admission Committee for Professional Courses** regarding my admission will be final and I shall abide by their decision. Further, if admitted, I promise to abide by the rules and regulations of the Institute as applicable during the course of study. I am also aware that ragging is banned and if, found guilty, I shall be liable for punishments as per rules. I abide to pay the fees as decided. I abide to pay the fees as determined by the Fee Regulatory Committee for the year 2019-20.

Date :   -   -

Place :

Signature of Father / Guardian

Signature of Applicant

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**Enclosures :** Attach the Xerox copy of following certificates (duly attested) in the order mentioned.

- (1) Marksheet of Dip. in Pharmacy Part-II
- (2) Marksheet of Dip. in Pharmacy Part-I
- (3) H. S. C. Marksheet
- (4) School Leaving Certificate
- (5) Caste Certificate (if applicable)
- (6) Two Passport Size Photographs
- (7) STPI Mark Sheet
- (8) For SEBC Candidates Valid Non-Creamy Layer Certificate issued by State Government
- (9) P.H. Certificate issued by District Level Govt. Civil Surgeon (if applicable)
- (10) In/Ex Serviceman Certificate issued by District Sainik Welfare & Resettlement Officer
- (11) For TFWS family valid income certificate issued by State Government



**Commissionerate of Technical Education, Gujarat State  
Admission Committee For Professional Courses (ACPC)**



Cash Receipt for Application cum Registration Fee for Admission in **Diploma to Degree Pharmacy 2019-20** **ACPC Copy**

To be filled by Candidate	For Office Use Only
Name :	Amount of Fee <b>Rs. 350/-</b> in cash only.
Board :	ACPC Seal :
	Date :
	ACPC Challan No. : <input type="text"/>

Application Form Fee Rs. 350/- is not refundable.

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Admission Committee For Professional Courses (ACPC)**



Cash Receipt for Application cum Registration Fee for Admission in **Diploma to Degree Pharmacy 2019-20** **Account Copy**

To be filled by Candidate	For Office Use Only
Name :	Amount of Fee <b>Rs. 350/-</b> in cash only.
Board :	ACPC Seal :
	Date :
	ACPC Challan No. : <input type="text"/>

Application Form Fee Rs. 350/- is not refundable.

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Cash Receipt for Application cum Registration Fee for Admission in **Diploma to Degree Pharmacy 2019-20** **Candidate Copy**

To be filled by Candidate	For Office Use Only
Name :	Amount of Fee <b>Rs. 350/-</b> in cash only.
Board :	ACPC Seal :
	Date :
	ACPC Challan No. : <input type="text"/>

Application Form Fee Rs. 350/- is not refundable.