



VICTORIA COLLEGE OF PHARMACY

Challavaripalem(Vil), Nallapadu(Via), Guntur-522005
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APPLICATION FORM FOR ADMISSION TO FIRST YEAR OF B.PHARMACY
UNDER B - CATEGORY SEATS (MANAGEMENT QUOTA) - 2013-14

Cost of Application form Rs.500/- paid by Cash/DD No:....., Date:

1	Name of the candidate	:	
2	Name of the Father / Guardian	:	
3	Permanent address	:	
4	Telephone Nos.	Cell No	:
		Land No	:
5	a) Overall Percentage of qualifying examination	:	
	b) Group Percentage of qualifying examination	:	
6	AIEEE Rank (All India Rank)	:	
7	EAMCET Rank	:	
8	Branch opted in order of preference	:	(B.PHARMACY) []

DECLARATION

1. We declare that all the particulars given above are true. We understand that any particulars given 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.
2. We also declare that we agree to pay the annual tuition fee as stipulated in G.O.Ms.No.62, dt.18.07.2013

Signature of the Applicant
(Name in block letters)

Signature of the Father / Guardian
(Name in block letters)