

**SANKARALINGAM BHUVANESWARI COLLEGE OF PHARMACY**

3/77-C, Anaikuttam - 626 130.

SIVAKASI, Tamil Nadu.

(Affiliated to the Tamil Nadu Dr. M.G.R. Medical University, Chennai.)

Approved by AICTE and PCI, New Delhi.)

APPLICATION FORM **BACHELOR** OF PHARMACY 2018 - 2019Application No. **BP**

Quota Type : Govt / Management

Regular / Lateral :

1. Name of the Candidate (IN CAPITAL)

as per school record -----

2. Name of the Father :

3. Name of the Mother :

4. Name of the Guardian (if required) :

5. Address : Permanent : Communication

Door No :

Street :

Town :

Village / Taluk :

District :

State :

Pin Code :

Phone No. with STD Code :

Parent Cell :

Email-ID :

Candidate Cell :

6. Sex :

Male

Female

7. a) Date of Birth (Christian era) :

(As per HSC Mark sheet)

Date  
Month  
Year  

b) Age as on 31-10-2018 :

..... Years ..... Months

8. a) Community :

ST SC MBC / DNC BC 

Others

b) Particulars by ST / SC / MBC / DNC / BC Students

(i) Religion :

(ii) Caste :

(iii) Issued by :

(iv) Date :

(v) Place :

c) (i) Aadhaar No :

(ii) Bank A/c No :

(iii) Name of Bank :

(iv) Branch :

(v) IFSC Code :

(vi) MICR Code :

9. Blood Group :

10. SSLC Register No :

PHOTOGRAPH

Affix your recent  
Passport size photograph

Signature

11. School of Study :

S.No.	Class	Year of Passing	Name of the School / College	Village / Town	District	State
1.	XII					
2.	..... Other specify					

12. a) Qualifying Examination Passed :

- i)
- |                  |                          |                    |                          |        |                          |
|------------------|--------------------------|--------------------|--------------------------|--------|--------------------------|
| H.Sc. (Academic) | <input type="checkbox"/> | H.Sc. (Vocational) | <input type="checkbox"/> | CBSE   | <input type="checkbox"/> |
| ISCE             | <input type="checkbox"/> | BOI                | <input type="checkbox"/> | Others | <input type="checkbox"/> |

ii) Medium of Instruction :

- |                                    |                                  |   |                                |
|------------------------------------|----------------------------------|---|--------------------------------|
| <input type="checkbox"/> Tamil     | <input type="checkbox"/> Telugu  | <input type="checkbox"/> Kannada                      | <input type="checkbox"/> Hindi |
| <input type="checkbox"/> Malayalam | <input type="checkbox"/> English | <input type="checkbox"/> Other Indian Languages ..... |                                |

iii) Marks in the Qualifying Examination : (H.Sc)

Subject	Register Number	Certificate No.	Month & Year	Max. Marks	Marks Obtained	Percentage
a) Tamil						
b) English						
c) Physics						
d) Chemistry						
e) Mathematics						
f) Biology						
g) Botany						
h) Zoology						
i) **						
j) **						
<b>Total Marks for 200 : ( % Physics and Chemistry + % of Maths or Biology) or (corrected to 2 decimals) ( % Physics and Chemistry + % of Botany and Zoology</b>						

\*\* Specify subjects

- v) Name of the Exam Board :
- vi) Transfer Certificate No. & Date :
- b) Diploma Examination : D. Pharmacy (for Direct II year admission / lateral entry)
- i) College of study :
- ii) State :
- iii) Marks obtained :

Year	Register No.	Month / Year of Passing	Max. Marks	Total Marks Obtained	Percentage
First Year					
Second Year					
Total					

iv) Pharmacy Council Registration No:.....Date:.....

13. Place of Birth, District & State : -----  
: -----
14. Native Place & District :
15. State Extra - curricular activities : i) -----  
( Xerox copy for proof ii) -----  
If any for state / district level ) iii) -----
16. a) Name of the Parent / Guardian : -----  
b) Occupation of Parent/ Guardian & Income : ----- Rs: -----
17. Whether Hostel Required (Yes / No) :
18. Whether Eligibility certificate obtained from the T.N. Dr. M.G.R. Medical University, Chennai.  
If yes, Certificate No. .... and Date of Issue :.....
19. Migration Certificate No:.....and Date of issue.....
20. a) Are you physically challenged ? :  Yes  No  
b) If yes, state the nature of Physical challenge. Documentary evidence to be produced.

**DECLARATION BY THE APPLICANT AND PARENT / GUARDIAN**

I hereby solemnly and sincerely affirm that the statements made and the information furnished by me in the application and also in the enclosures thereto submitted by me are true. Should any information furnished therein however be found untrue in material particulars or on verification at a later stage, I am liable for criminal prosecution and I also agree to forego my seat offered in this institution / for removal of my name from the rolls of the institution at whatever stage of study I may be, at that time of detection of such wrong particulars. I am aware of the Institution's approach towards ragging and punishments to which he/she shall be liable if found guilty of ragging as per Supreme court order

I will abide by the rules, regulations, and code of conduct of the College mentioned in college calendar and application

Place :

Date :

Signature of the Student

I am fully aware of the above declaration and I have understood the same.

Place :

Date :

Signature of the Parent / Guardian

Note : Guardian can execute the above declaration only if both the parents are not alive.

**UNDERTAKING**

From : \_\_\_\_\_ To  
The Principal  
Sankaralingam Bhuvanewari College of Pharmacy  
Anaikuttam, Sivakasi - 626 130.

Sir,  
I, ..... parent / Guardian  
of ..... residing at .....  
..... seeking admission for my son  
/ daughter / ward, understand the following terms and conditions and undertake to abide by the same in case my  
son / daughter / ward is admitted to Sankaralingam Bhuvanewari College of Pharmacy in the year 2018 - 2019

1. I agree that admission to the College will be based on the criteria approved by Tamilnadu State Government.
2. I agree to pay promptly the fees and other charges as stipulated by the management within the stipulated time. Additional time of 15 days will be allowed with belated payment charge of Rs.250/- and thereafter removed from roll. Afterthat re-admission will be given with re-admission fees of Rs.1000/-.
3. I agree to pay any further increase in these fees and other charges as decided by the management.
4. I Agree to pay the full course fee for one year (for 1 year) in case my son / daughter discontinues the course in first year before registration. If the student discontinues after registration, 4 years fees must be paid. If a student discontinues in II year and after wards, the remaining years fees must be paid.
5. I Agree to pay the full course fee (for 4 years) in case my son/daughter discontinues the course in the middle of the academic year/after joining the course.
6. I am aware of the institution's Policy towards ragging and punishment for my son / daughter / ward if found guilty of ragging as per the Tamil Nadu Prohibition of ragging act of 1997.
7. I am aware of the institution policy of more then two disciplinary action in a year or more then three disciplinary action in a course leads to automatically dismissed from the course and college.
8. I am aware of the university norms of attendance to appear for final examination (Semester / Non Semester)
9. I am aware of the rules and regulation of the college and payment terms.

Signature of Student

Signature of Parent / Guardian

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**FOR OFFICE USE ONLY**

1. Any specific major change :

2. Reason for rejection :

3. Important Particulars

verified by

.....

.....

(Name)

(Signature)

4. Originals verified by

.....

.....

(Name)

(Signature)

5. Countersigned by

.....

.....

(Name)

(Signature)

6. Registration No :

## INSTRUCTIONS TO CANDIDATES

1. Admission will be made as per the Guidelines of AICTE & PCI Newdelhi, Govt of Tamilnadu and The Tamilnadu, Dr. M.G.R. Medical University, Chennai.
2. Put a Tick [✓] mark in the appropriate box wherever a box is provided.
3. Enclose Attested Xerox copies of T.C. and Mark Sheets (X Std. & XII Std)
4. Enclose Attested Xerox copies of Community, Nativity, Permanent Residence, Original Migration certificate Pharmacy Council Registration Certificate, Diploma certificate, Sports, Games, NCC, Mark Sheets of Diploma etc. if applicable.
5. An Attested Photo of the candidate should be affixed in the space provided
6. The candidate should ensure that the details furnished by him/her in his application form should be correct. The candidate is informed that, if any of the details furnished by the candidate in the application is erratical or false found either by institution or by the university later on
  - i) He/She will forfeit the admission, no matter at what stage of the course he/she may be at that time, without reimbursement of any fees.
  - ii) He/She will be debarred from pursuing any course of study for a period of three years.
  - iii) Legal action will be instituted against him / her for furnishing wrong information about his / her marks.
7. The applicant and the Parent / Guardian should sign the undertaking on page 04.
8. Application form duly filled in should be given in person at **SANKARALINGAM BHUVANESWARI COLLEGE OF PHARMACY, Anaikuttam, Sivakasi**. The candidate and the Parent should be present at the time of Registration **with all the original Certificates**.
9. **LAST DATE FOR REGISTRATION OF APPLICATION .....**

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## CHECK LIST

(The candidate should ensure that the documents are arranged and enclosed as per the check list)

1. Application duly filled with all details and photograph affixed.
2. Xerox copy of the X Examination Mark Sheet
3. Attested Xerox copy of the XII Examination Mark Sheet
4. Attested Xerox copy of the Transfer Certificate issued by School / College, last studied.
5. Attested Xerox copy of the Community Certificate/Cast Certificate
6. Attested Xerox copy of Eligibility Certificate from Tamilnadu Dr. M.G.R. Medical University (if applicable)
7. Attested Xerox copy of Diploma Mark Sheets (if applicable)
8. Attested Xerox copy of original Diploma in Pharmacy (if applicable)
9. Medical fitness Certificate from a MBBS Registered medical practitioner
10. Attested Xerox copy of Migration certificate. (if applicable)
11. Attested Xerox copy of Pharmacy council Registration certificate. (if applicable)
12. Attested Xerox copy of State Bank of India Bank Pass book (First page) with net banking facility

## SANKARALINGAM BHUVANESWARI COLLEGE OF PHARMACY

ANAIKUTTAM, SIVAKASI - 626 130.

YEAR : 2018 - 2019

**ADMISSION APPLICATION ENCLOSURES**

DATE :

COURSE : B.PHARM

(To be filled by the selected Candidate)

Application No : .....

NAME OF THE CANDIDATE :

Registration No : .....

S.No.	Particulars	Certificate No.	Original Copies	Number of Xerox Copies
1.	SSLC Mark Statement	-----	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.	HSC Mark Statement	-----	<input type="checkbox"/>	<input type="checkbox"/>
3.	T.C from the Institution last studied	-----	<input type="checkbox"/>	<input type="checkbox"/>
4.	Conduct Certificate	-----	<input type="checkbox"/>	<input type="checkbox"/>
5.	Community Certificate	-----	<input type="checkbox"/>	<input type="checkbox"/>
6.	D.Pharm Mark Sheet (if applicable)	-----	<input type="checkbox"/>	<input type="checkbox"/>
7.	Diploma Certificate (if applicable)	-----	<input type="checkbox"/>	<input type="checkbox"/>
8.	Pharmacy Council Registration Certificate	-----	<input type="checkbox"/>	<input type="checkbox"/>
9.	Eligibility Certificate from University (if applicable)	-----	<input type="checkbox"/>	<input type="checkbox"/>
10.	Migration Certificate (if applicable) (Regd Medical Practitioner)	-----	<input type="checkbox"/>	<input type="checkbox"/>
11.	Medical Certificate issued by Doctor	-----	<input type="checkbox"/>	<input type="checkbox"/>
12.	Income Certificate (with validity date)	-----	<input checked="" type="checkbox"/>	<input type="checkbox"/>
13.	State Bank India account Pass Book (first page) with net banking	-----	<input type="checkbox"/>	<input type="checkbox"/>
14.	Aadhaar Card	-----	<input type="checkbox"/>	<input type="checkbox"/>
15.	Any other enclosures (specify)      a)	-----	<input type="checkbox"/>	<input type="checkbox"/>
16.	Passport size photo copies	-----	<input type="checkbox"/>	<input type="checkbox"/>

Checked } Signature :  
&        }  
Collected } Name        :

Signature of the Student with date

### For Office Use

Registration No :

Admission No. :

Admitted / Not Admitted :  
(reason for not admitting)

Administrative Officer / Manager

Principal

## **RULES, REGULATIONS AND DISCIPLINE TO BE FOLLOWED BY THE STUDENTS IN THE COLLEGE**

1. "Discipline and service" is the hall mark of every SBCP-ian. (the student of SBCP) It is the prime objective of the students to acquire knowledge. They should inculcate a sense of service to the society as a successful pharmacist, when they leave the college.
2. SBCP-ians should show respect and deference to the college authorities and to the members of the staff. The students' behavior is to be gentlemanly at all times and in all places, both inside and outside the college campus.
3. SBCP-ians should be punctual and they should keep the class rooms, Laboratories, rest rooms and college premises clean
4. SBCP-ians should wear uniform regularly to the college, white-coat for the practical classes and students are required to possess ID cards inside the premises.
5. Damage done to the buildings, furniture, library books, sports goods and other items of college property must be compensated at the end of academic year
6. The misbehavior and misconduct of the students both in the college and hostel will be brought before the disciplinary committee. A detailed enquiry will be conducted by the disciplinary committee. The action will be taken based on the report of the committee. The committee's report is final.
7. I am aware of the institution policy of more than two disciplinary action in a year or more than three disciplinary action in a course leads to automatically dismissed from the course and college.
8. Organizing or attending meetings in the college campus or collection of funds for any purpose without the written permission of the principal is forbidden.
9. Copying and helping other to copy in examinations, exchanging answer scripts, talking or communicating in the examination hall by sign language, possessing printed notes or manuscripts even if not associated with the subject of the examination, substitution of answer papers, exchange of question paper, altering marks, forging signatures will lead to dismissal from the college.
10. Any form of teasing others and ragging will be viewed as a criminal offence, as per Tamil nadu prohibition of Ragging Act of 1997. Ragging is punished with imprisonment for a term which may extend to 2 years and shall also be liable to a fine which may extend to Rs. 10,000/-. Such a student shall be dismissed from the institution. The student should execute an undertaking to this effect in a non-judicial stamp paper
11. All request, petitions, complaints and appeals should be made only to the principal through counsellor.
12. Cellphones are strictly prohibited inside the college premises. If it is found, cell phones will be seized and it will not be returned back for a year. Serious actions will be taken including dismissal from College.
13. To sit for the board / university Examinations every students must have attended 90 percentage of the working days for each subject and attendance will be taken at the beginning of every class.
14. No student will be allowed to absent himself/herself form college without leave. The application for leave should be submitted in advance stating clearly the reasons for absence through the staff counsellor. It must be counter-signed by the parents or the warden if he or she is a hosteller.
15. Attendance norms as per University / PCI are applicable for appearing for the university examination.
16. Laboratories are meant for educating the students. Great care should be taken by the students in handling the apparatus of the laboratory. All breakage, damages, losses ect., must be reported to the lecturer concerned as soon as they occur. The cost of articles broken, damaged or lost will be recovered from the students concerned at the end of the academic year.
17. During the working hours, if a parent wants to meet his ward for some urgent reason he/she shall kindly report at the principal's office and not go to the class of the student directly.
18. When a student is removed or dismissed from the hostel, he/she is automatically removed from the college. The vice versa is also applicable.
19. The management and the college authorities are not responsible for the loss of any articles, valuables and belongings of the students. It is the responsibility of the student to take care of his/her belongings.

Read carefully and sign in presence of Principal.

Signature of the Parent / Guardian

- 7 -

Signature of the Student

Name of the Applicant ..... Registration No.....

**TRACKING SHEET**

DATE	DETAILS

SPECIMEN SIGNATURE OF THE CANDIDATE  
(Black ink only)

Name of the Candidate (IN CAPITAL) :

- 
- 
-