



BENGAL SCHOOL OF TECHNOLOGY

Autonomous

Estd. by Supreme Educational Development and Charitable Organization (SEDCO)

Recognised by UGC & included u/s 2(f) of UGC Act 1956

Approved by Pharmacy Council of India, New Delhi

Affiliated to: Maulana Abul Kalam Azad University of Technology (MAKAUT) & West Bengal State Council of Technical and Vocational Education and Skill Development (WBSCT & VE & SD)

Accredited by NAAC with "A" Grade, Accredited by NBA for B. Pharm

Sugandha, Delhi Road, Near Chinsurah Railway Station, Hooghly - 712 102, West Bengal, E Mail : bstpharmacy@hotmail.com

Website : www.bstpharmacy.in

APPLICATION FOR ADMISSION TO B. PHARM COURSE

1. Name of the candidate in full :

(BLOCK LETTERS) FIRST NAME MIDDLE NAME LAST NAME

2. Date of Birth : ____/____/____ [D / M / Y]

Date of Birth in words as recorded in Class X Admit Card

PHOTO

3. Aadhar No. :

4. Nationality : 5. Religion :

6. Blood Group :

7. Rank : WBJEE JEE (MAINS)

9. Percentage of Marks obtained in 10+2 Science:, Subjects at 10+2 Science: MPC / MPCBi / BiPC

Marks Obtained: PHYS [] CHEM [] MATH [] BIOS [] FULL MARKS (10+2): []

Total Marks obtain in the group (PCM / PCB) (Please Tick) [] Percentage (%) []

10. Permanent Residential Address: Village / City.....

P. O..... P. S.

Dist..... Pin code:.....

Phone : (M) E-mail:

Alternate Mobile: (Father/ Mother / Self/ Local Guardian)

11. Social Category: GEN / SC / ST / OBC/ PWD / Others (Please Tick) (Evidence to be enclosed)

12. Gender: MALE / FEMALE (Please Tick).

13. Father's Name :, Ph No.....

14. Mother's Name : Ph No.....

Signature of Student

Date: _____

Signature of Guardian

Date : _____