# Indian Institute of Ayurvedic Pharmaceutical Sciences

(An ISO 9001:2008 Certified College)

### **Gujarat Ayurved University**

Accredited Grade "A" by NAAC (CGPA 3.28)

A.K.Jamal Building, Guru Nanak Road, Jamnagar – 08.

Ph. 0288 – 2555746,

E - mail Principal.iaps@ gmail.com., iaps@ayurveduniveristy.com.,

Web: www.iaps.ac.in

## ADMISSION FORM

D. Pharm. (Ayurved)

20 - 20

| Name of Applicant: |                     | त्रिट |
|--------------------|---------------------|-------|
| 773                | FOR OFFICE USE ONLY | 41    |
| Application No.    | Caste               | Date  |

SC/ST/OBC/SEBC/GENERAL/OTHER

#### **GENERAL INSTRUCTIONS**

- a. Attach a DD/ NEFT/RTGs/ Cheque of Nationalized Bank/ Net banking receipt worth Rs. 400/- in favour of "The Principal-IAPS, Jamnagar", payable at Jamnagar.
- b. Candidate's Name must be as printed in Standard 10<sup>th</sup> mark sheet.

Checked by:

- c. Please write your caste and sub-caste as per school leaving certificate / transfer certificate in the boxes provided as applicable.
- d. Date of Birth must be mentioned as per standard 10<sup>th</sup> Certificate / School leaving certificate / transfer certificate.
- e. Attach a self-addressed envelope (12cm x 4cm) affixed with Rs. 25/- postal stamp along with the admission form.
- f. For more information please visit our website: <a href="www.iaps.ac.in">www.iaps.ac.in</a> & <a href="www.ayurveduniversity.com">www.ayurveduniversity.com</a> and email: <a href="mailto:iaps@ayurveduniversity.com">iaps@ayurveduniversity.com</a> or <a href="Phone/Fax: +91-288-2555746">Phone/Fax: +91-288-2555746</a>.
- g. On cancellation of admission, 50% amount of the fees will be refunded within a month of admission.

#### **FOR OFFICE USE ONLY**

| Remarks                                 | 20          |      |
|---|-------------|------|
| 1. D.Pharma Final Year Marksheet:       | Merit Marks |      |
| 2. School leaving certificate:          | -60         |      |
| 3. Attempt certificate:                 | Sr. No.     |      |
| 4. Caste certificate:                   | (Admission) |      |
| 5. Non- creamy layer certificate:       |             | 1 11 |
| 6. Domicile or nationality certificate: | Officer     | 7    |
| 7. Application form fee                 | Signature   |      |
| Verified by :                           | 111-1       |      |

| Per     | sonal Detail:            |                    | -         | -            | -                       |         |  |
|---------|--------------------------|--------------------|-----------|--------------|-------------------------|---------|--|
| Gende   | r: Male Female           |                    | 310       | यदाउन        | TETE                    | S.      |  |
| Nation  | ality: Indian            | NRI Fo             | oreigners |              |                         | 1       | D1   |
| If Fore | eigners then specify you | ır country's name  | :         | N BE         | M. Jo                   |         | Photograph with  |
| 1.      | Candidate's name (as     | per marksheet):    | 1         | and the same | 19/                     |         | signature  |
|         | Surname                  | Name               | Fa        | nther's Name |                         |         | Name of the last o |
|         | Father's Name            |                    |           |              |                         | 1       |  |
|         | Mother's Name            |                    |           |              |                         |         |  |
|         | Father's Occupation_     | 111                |           | Annual Inc   | ome                     | 111     |  |
|         | Personal Mobile No.      | -                  | 111       |              |                         | 1       |  |
|         | Father's Mobile No.      |                    |           | Mother's N   | Mo <mark>bile</mark> No |         |  |
|         | Corresponding Address    | ss with Pincode: _ | 70        |              |                         |         |  |
|         |                          |                    |           |              |                         |         |  |
|         | Caste: OpenS             | SC ST              | SEBC      | OTHERS       | If others then          | Specify | Con 217  |
|         | Email ID:                | PT                 |           |              |                         | 20      | 11364  |
|         | Goal                     | 17                 | 5-        |              | -1                      |         |  |
|         | Aadhaar Card No          |                    | 047       | युवे         | 2 3                     | )       |  |

| <b>Educational</b> | <b>Qualification:</b> |
|--------------------|-----------------------|
|--------------------|-----------------------|

Board from which 10<sup>th</sup> std. (S.S.C.) passed. Code (Gujarat-1, CBSE-2, ICSE-3, Others -4) If others then specify

Board Exam seat no. of 10<sup>th</sup> std., month & year of passing

#### Marks Obtained:

| Subject              | Marks<br>Obtained | Out of |
|----------------------|-------------------|--------|
| Science              |                   |        |
| Mathematics          |                   |        |
| Social Science       |                   |        |
| Hindi/English        |                   | 1      |
| Gujarati             | VI VIIII          |        |
| Sanskrit/Computer/PT | 1111              | 47-6-  |
| Sum Total            | 3                 | 13     |
| Total of Science and |                   |        |
| Mathematics          |                   |        |
| Overall Percentage   | Percentile        |        |

Attempt: 1 2 3 4

### **Copies of Documents to be Attached**

| 1. S.S.C mark sheet of all attempts as well as attempt certificate of attested copy   |
|---|
| 2. School leaving certificate (SLC)/ Transfer certificate (TC) and evidence of place of birth, if it is not mentioned in SLC/TC   |
| 3. Caste certificate of SC, ST, SEBC or others from the competent authority in prescribed performa (Two attested Xerox copies)  |
| 4. Non-creamy layer certificate of family from the competent authority in prescribed (for SEBC category only) for current year issued after 1 <sup>st</sup> April 2007 (Two attested Xerox copies)  |
| 5. Copy of passport if held.  |
| 6. Certificate for staff quota in prescribe Performa.   |
| 7. One self addressed envelope (12cm x 4cm) with postal stamp of Rs. 25/-   |
| 8. Domicile and nationality certificate for out state candidate only  |
| 9. Proxy letter [In case of candidates unavailability to attend an interview]   |
| 10. DD/Cheque/NEFT/RTGs of nationalized bank/online banking printout  |
| 11. Aadhaar card  |
| I hereby declare that the information given above is true. If found false, I understand that my admission will be cancelled. I shall abide by the rules & norms of discipline of the institute I join. I also undertake to pay the necessary fees as decided. |
| Signature of Parent/Guardian Date and Place Signature of Candidate  |
|   |