

**University Institute of Pharmacy
Pt. Ravishankar Shukla University, Raipur**

Important Dates

S. No.	Activity	Schedule
1.	Information brochures along with application form available at our website www.iopraipur.ac.in for download.	From 13 June, 2018
2.	Submission of downloaded application form with all enclosures and a D.D of Rs. 500 as registration fee, payable at Raipur in favor of Director, Institute of Pharmacy at institutional address.	On or before 09 July, 2018
3.	Display of merit list at the Notice Board and on website of Institute of Pharmacy, www.iopraipur.ac.in	On 11 July, 2018

Candidates must read the following instructions before filling the application form

1. The application form is available only on our website www.prsu.ac.in & www.iopraipur.ac.in. After downloading the form from the website, the candidates are required to submit the downloaded printed form along with the required testimonials and a DD of registration fees at the following address on or before July 9th, 2018 to the Director, University Institute of Pharmacy, Pt. Ravishankar Shukla University, Raipur- 492010 (Chhattisgarh)
2. The name of selected candidates according to their merit will be displayed on departmental Notice board and website.
3. The call letters will be sent to the selected candidates for the verification of documents, deposition of fee and admission. Self attested copies of certificates to be attached with form. Originals to be produced at the time of verification.

Application form To be filled in by the applicant

Affix passport
sized
photograph
duly attested

Instructions

1. The application form should be filled in by the candidate in his own handwriting.
2. The application form will not be accepted for consideration unless it is complete in all respects as per instructions.

Category				Domicile		Gender	
SC	ST	OBC	GEN	CG	Other state	Male	Female

1. Name in full (in block letters, same as entered in School & College Certificate)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

2. Father's name

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

3. Mother's name

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

4. Applicant's permanent address (with Tel. /Mobile No.)

5. Postal address for communication (with Tel. /Mobile No.)

6. Telegraphic/Fax/e-mail address

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

7. Date of birth (as given in Matriculation Certificate)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

8. Married/Single

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

9. Academic Career: (Please attach attested copies of marks sheets and certificates)

Examination Passed	Name of the University or Board	Year of Passing	Division	Percentage of Marks
High School/ Matriculation				
Higher Secondary				
B.Pharm. (Aggregate)				
G-PAT Result	Score			
	Qualifying Year			
	Status	Qualified / Not Qualified		

Declaration by the candidate

I certify that to the best of my knowledge and belief all the entries made herein are correct. If admitted, I undertake to abide by the rules of the University, Institute, Department and Hostel discipline.

I, do hereby declare that I have read the “Notification for Admission” carefully and, have hereunder affixed my signature. I fully realize that in the event of any information contained in the application being incorrect or false, my admission to the institute is liable to be cancelled at any time.

Place:.....

Date :

Signature of the Applicant

List of enclosures

The following enclosures MUST be attached with the application for admission:-

1. Self attested true copies of marks-sheets of all the examinations passed (Matriculation onwards).
2. Self attested true copy of the GPAT score.
3. SC/ST/OBC certificate for Chhattisgarh state domicile candidates only, if applicable (preferably issued in the current calendar year).
4. Domicile certificate if, the candidate is domicile of Chhattisgarh.

Documents/certificates furnished after the submission of the application will not be entertained under any circumstances. No opportunity will be given to incorporate any details after the submission of the application.

All certificates in original are to be produced at the time of verification. In case of any doubt about any certificate furnished by the candidates, such certificate will be accepted only if found correct on further verification. Admission given will be cancelled, if it is found later, false certificates have been produced or that the admission has been secured by false means.

Selected candidates are required to retain the following documents at the time of reporting for verification of documents and admission.

1. Photocopy of the filled up application form.
2. Proof of dispatch of the application form (if sent by post)
3. All original testimonials and their attested photocopy in 2 sets.
4. Passport size recent color photograph.
5. A Demand Draft of Rs.55000/- (Fifty-five thousand) payable at Raipur in favor of The Director, University Institute of Pharmacy as fee for first semester.

Seats Details

Name of Course	Total Seats	Category
M.Pharm (Pharmaceutics)	12	UR- Open-04 UR-F-01 SC-Open-01 ST-Open-03 ST-F-01 OBC-Open-01 OBC-F-01

SC=Scheduled caste, ST= Scheduled Tribe, OBC= Other Backward Class, UR=Unreserved, F= Female
All seats are reserved for the candidates having domicile of Chhattisgarh.