

PERMISSION CUM ADMISSION FORM FOR (D.Pharmacy)
STATE BOARD OF TECHNICAL EDUCATION, HARYANA

1. Examination (Month/Year) : _____
2. Roll No. _____
3. Name of Discipline: _____
4. Name of Candidate _____
(in block letters)
5. Father's Name _____
(in block letters)
6. Mother's Name _____
(in block letters)
7. Mobile No. : _____
8. Student's Date of Birth _____
9. Email Id: _____

PHOTO

10. Address:

11. Subject which the candidate wishes to appear (Name or Code)

S. No.	D. Pharmacy 1 st Year		D. Pharmacy 2 nd Year	
	Theory	Practical	Theory	Practical
1.				
2.				
3.				
4.				
5.				
6.				

I solemnly declare that I have not been debarred on account of detention in sessional / attendance / U.M.C / Conduct / Non-deposit of fee/having already availed max. Permissible changes/ duration for examination to be held _____ (Month/Year)

Date: _____

Signature of Candidate:

CERTIFICATE BY THE PRINCIPAL

1. Certified that _____ is/was bonafide student of this institution.
2. Certified that particulars given above by the candidate are correct as per official record.
3. Certified that the Roll No. Slip has been issued to the candidate after ascertaining his eligibility in all respect to sit in the Examination.
4. Certified that the conduct of the candidate is _____
5. The Examination fees of Rs. _____ of the candidate is included in the amount of Rs. _____ remitted in to Haryana Govt. Treasury/PNB A/C No. **0087000111223535** vide online _____ Dt. _____ under Head 007 Education Examination, Examination Fees.

Signature of Principal and seal of institute

PERMISSION CUM ADMISSION FORM FOR DMLT EXAMINATION
STATE BOARD OF TECHNICAL EDUCATION, HARYANA

- 12. Examination (Month/Year)** _____
- 13. Roll No.** _____
- 14. Name of Discipline:** _____
- 15. Name of Candidate** _____
(in block letters)
- 16. Father's Name** _____
(in block letters)
- 17. Mother's Name** _____
(in block letters)
- 18. Mobile No. :** _____
- 19. Student's Date of Birth** _____
- 20. Email Id:** _____

PHOTO

21. Address:

22. Subject which the candidate wishes to appear (Name or Code)

Sr. No.	1 st Sem/Year		2 nd Sem		3 rd Sem		4 th Sem		5 th Sem	6 th Sem
	Th.	Pr.	Th.	Pr.	Th.	Pr.	Th.	Pr.	Training	Training
1.										
2.										
3.										
4.										
5.										
6.										
7.										

I solemnly declare that I have not been debarred on account of detention in sessional / attendance / U.M.C / Conduct / Non-deposit of fee/having already availed max. Permissible changes/ duration for examination to be held _____ (Month/Year)

Date: _____

Signature of Candidate:

CERTIFICATE BY THE PRINCIPAL

6. Certified that _____ is/was bonafide student of this institution.
7. Certified that particulars given above by the candidate are correct as per official record.
8. Certified that the Roll No. Slip has been issued to the candidate after ascertaining his eligibility in all respect to sit in the Examination.
9. Certified that the conduct of the candidate is _____
10. The Examination fees of Rs. _____ of the candidate is included in the amount of Rs. _____ remitted to Haryana State Board of Technical Education vide online with Transaction No. _____ Dt. _____ .

Signature of Principal and seal of institute