


70/0015

Directorate of Technical Education, Maharashtra State, Mumbai

Receipt-Cum-Acknowledgement of Confirmation of Admission to First Year of Four-Year Full-Time Degree Courses in Pharmacy for Academic Year 2015-2016

Application ID : PH15122916 Receipt No : 5207207

Personal Details		 05-12-2014
Candidate's Name	AMRUTHAVARSHINI	
Gender	Female	
Date of Birth	06/12/1997	
Candidature Type	OMS	
Home University	Other Than Home University	
Category	Not Applicable	
Category for Admission	Not Applicable	
Person with Disability	Not Applicable	
Defence Type	Not Applicable	

Admission Details	
Merk No	37
Merk Marks	36
Institute Name	MET's, Institute of Pharmacy, Bhambal Knowledge City, Methegaon College, Adgaon, Nashik
Course Name	Pharmacy
Choice Code	520723310
Seat Type	AT
Reference No.	1
Date of Admission	02/07/2015

Fee Details						
Sr. No.	Payment Mode	Fee Amount	DD/Cheque Number	Payment Date	Bank Name	Branch Name
1.	DD / Cheque	74760	530749	01/07/2015	The Nashik Dist Central Coop. Bank	Sinnar MIDC Branch

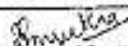
List of Documents Submitted at Institute	
Sr. No.	Document Name
1.	Certificate of Indian Nationality in the name of the Candidate.
2.	Statement of Marks or Certificate of Passing of Std. 10th / S.S.C. / Equivalent Examination.
3.	Statement of Marks or Certificate of Passing of Std. 12th / H.S.C. / Equivalent Examination.

Undertaking By Candidate

I hereby agree to conform to rules, acts and laws enforced by Government from time to time. I hereby undertake that so long as I am student of College / Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal / Director of College / Institute will have rights to expel, justify me from the institute, for any infringement of the rules prescribed by the college / institute / university / government and the undertaking given above. I also herewith undertake that, at later stage, if it is found that I have submitted false certificate(s)/document(s), I am aware that my admission stands cancelled and fees paid by me will be forfeited. Further I will be subjected to legal and/or penal action as per the provisions of the law.

Place: NASHIK Date: 02/07/2015

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Signature of Candidate
(AMRUTHAVARSHINI)

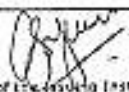
Declaration by the College / Institute

We hereby declare that, we are admitting this Candidate to our College / Institute for the course Pharmacy from the academic year 2015-2016 on verification of Candidate's identity and all the required documents mentioned above. The candidate has submitted all his original documents & paid the fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Printed By : 5207

Reported By : 5207

Reported On : 02/07/2015 12:27:35 PM



Signature of the Institute Officer


PRINCIPAL
MET's Institute of Pharmacy
Adgaon, Nashik-3.

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ST. XAVIER'S HIGH SCHOOL

At & Post - Charvada, Kopralli Road, VAPI - 396 193 (Gujarat)
Affiliated to the Central Board of Secondary Education, Delhi.
AFFILIATION No. 430058

TRANSFER CERTIFICATE

- Affiliation No. 430058 School Code No. 13020
- Book No. 17 Sl. No. 1605 Admission No. : 286
- Name of Pupil : Ms. AMRUTHAVARSHINI HEGDE
 - Mother's Name : MRS. VINDHYA
 - Father's Name / Guardian's Name : M.R. NARENDRA HEGDE
 - Nationality : INDIAN
 - Whether the candidate belongs to Schedule Caste or Schedule Tribe :
 - Date of first admission in the school with class : 14.13, XI
 - Date of birth (in Christian Era) according to the Admission Register (in figures) : 06/12/1997
(in words) SIXTH DECEMBER NINETEEN NINTY SEVEN
 - Class in which the pupil last studies (in figures) : XII
(in words) TWELTH
 - School / Board Annual examination last taken with result : AISSCE' 2015
 - Whether failed, if so once / twice in the same class : NO
 - Subject studied 1. ENGLISH 2. PHYSICS 3. CHEMISTRY 4. MATHS 5. BIOLOGY
 - Whether qualified for promotion to the higher class : YES
If so, to which class (in figures) (in words)
 - Month up to which the (pupil has paid) school dues / paid : MARCH' 2015
 - Any fee concession availed of : If so, the nature of such concession : NO
 - Total number of working days : 209
 - Total no of working days present : 166
 - Whether NCC Cadet / Boy Scout / Girl Guide (details may be given) TRUE COPY
 - Games played or extra-cirricular activities in which the pupil usually took part (mention achievement level therein) :
 - General conduct : G.O.O.D
 - Date of application for certificate : 26-5-2015
 - Date of issue of certificate : 3-6-2015
 - Reason for leaving the school : PASSED STD XII
 - Any other remarks QUALIFIED FOR HIGHER STUDIES

Principal
ST. XAVIER'S HIGH SCHOOL
KOPRALI ROAD, VAPI (EAST)

PRINCIPAL

MET's Institute of Pharma
Adgaon, Nashik-3.

Signature of
Class Teacher

Checked by
(State full name & Designation)

Principal Signature
& Seal
ST. XAVIER'S HIGH SCHOOL
KOPRALI ROAD, VAPI (EAST)