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
B. Pharm. (Ayurved)
2019 – 2020

Name of Applicant: ____________________________

FOR OFFICE USE ONLY

Application No.

Caste

SC/ST/OBC/SEBC/GENERAL/OTHER

Date

[Boxes for Application No., Caste, Date]
GENERAL INSTRUCTIONS

b. Candidate’s Name must be as printed in Standard 12\textsuperscript{th} mark sheet.
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\textsuperscript{th} 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: www.iaps.ac.in & www.ayurveduniversity.com and email: iaps@ayurveduniversity.com or Phone / Fax: +91-288-2555746.
g. On cancellation of admission, 50% amount of the fees will be refunded within a month of admission.

FOR OFFICE USE ONLY

Remarks

1. D.Phama Final Year Marksheet: 
2. School leaving certificate: 
3. Attempt certificate: 
4. Caste certificate: 
5. Non- creamy layer certificate: 
6. Domicile or nationality certificate: 
7. Application form fee
Verified by :

Checked by:

| Merit Marks |
| Sr. No. (Admission) |
| Officer Signature |
Personal Detail:

Gender: Male ☐ Female ☐

Nationality: Indian ☐ NRI ☐ Foreigners ☐
If Foreigners then specify your country’s name: __________________________

Candidate’s name (as per marksheet):
________________________________________________________________________
Surname Name Father’s Name
________________________________________________________________________
Father’s Name
________________________________________________________________________
Mother’s Name
Father’s Occupation ___________________________  Annual Income ____________________________

Personal Mobile No. ____________________________
Father’s Mobile No. ____________________________  Mother’s Mobile No. ____________________________

Corresponding Address with Pincode: __________________________________________
________________________________________________________________________

Caste: Open _____ SC _____ ST _____ SEBC _____ OTHERS _____ If others then Specify ____________________________

Email ID: __________________________________________

Goal __________________________________________

Adhar Card No. __________________________________________
**Educational Qualification:**

Board from which 12\textsuperscript{th} std. (H.S.C.) passed. Code

(Gujarat-1, CBSE-2, ICSE-3, Others-4)

If others then specify _________________________________

Board Exam seat no. of 12\textsuperscript{th} std. Month & Year of passing _________________________________

Group A [ ] B [ ] AB [ ]

Marks Obtained:

<table>
<thead>
<tr>
<th>Subject</th>
<th>Marks Obtained in Theory</th>
<th>Out of</th>
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<tbody>
<tr>
<td>Biology</td>
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<td>Mathematics</td>
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<td><strong>Sum Total Theory</strong> (B+P+C+M)</td>
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<tr>
<td>Overall Percentage</td>
<td>Percentile</td>
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</tbody>
</table>

Attempts: [ ] 1 [ ] 2 [ ] 3 [ ] 4
Copies of Documents to be Attached

1. [ ] H.S.C. mark sheet of all attempts as well as attempt certificate of attested copy
2. [ ] S.S.C. certificate & mark sheet
3. [ ] School leaving certificate (SLC)/ Transfer certificate (TC) and evidence of place of birth, if it is not mentioned in SLC/TC
4. [ ] Caste certificate of SC, ST, SEBC or others from the competent authority in prescribed Performa (Two attested Xerox copies)
5. [ ] Non-creamy layer certificate of family from the competent authority in prescribed (for SEBC category only) for current year issued after 1st April 2007 (Two attested Xerox copies)
6. [ ] Copy of passport if held.
7. [ ] Certificate for staff quota in prescribe Performa.
8. [ ] One self addressed envelope (12cm x 4cm) with postal stamp of Rs. 25/-
9. [ ] Domicile and Nationality Certificate only for out state candidate.
10. [ ] Proxy letter [In case of candidates unavailability to attend an interview]
11. [ ] DD/Cheque/NEFT/RTGs of nationalized bank/online banking printout
12. [ ] 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