Shri Balaji Shikshan Prasarak Mandal's



B.PHARMACY COLLEGE

Modi Learning Center, Ring Road, AMBAJOGAI Dist Beed-431517. (M.S.) PH (0): 02446-244018, (0): 02446-248753, Fax: 02446-245684 **Affiliated to Dr. B.A.M.U. Aurangabad**



Approved by P.C.I. New Delhi, D.T.E. Mumbai and Govt. of Maharashtra

website: www.mlcpharmacy.edu.in/copambajogai

E-mail:sbspmprincipal@gmail.com

Academic Year 2022-23



B.PHARMACY COLLEGE

Modi Learning Center, Ring Road, AMBAJOGAI Dist Beed-431517. (M.S.) PH (0): 02446-244018, (0): 02446-248753, Fax: 02446-245684 Affiliated to Dr. B.A.M.U. Aurangabad

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website: www.mlcpharmacy.edu.in/copambajogai

E-mail:sbspmprincipal@gmail.com

List of students

Sr. No.	Name of Student	Program graduated from	Year of graduation	Name of institution joined	Programme Admitted to	Contact No
1	Mr. Gangarde Krushna Vishnu	Sbspm B.Pharm	2023	NIPER Ahmadabad	M.S (NIPER)	7499993155
2	Mr. Gadade Ajeet Angad	Sbspm B.Pharm	2023	NIPER Guwahati Assam	M.S (NIPER)	7796113733
3	Mr. Aade Rahul Tulshiram	Sbspm B.Pharm	2023	NIPER Guwahati Assam	M.S (NIPER)	7972614044
4	Ms. Munde Kalyani Tukaram	Sbspm B.Pharm	2023	Dr. D.Y. Patil college of pharmacy Akurdi, Pune	M.PHARM	9552361965
5	Ms. Deshmukh Sneha Dipak	Sbspm B.Pharm	2023	Sinhgad College of Pharmacy, Vadgaon , Pune	M.PHARM	9049105657
6	Ms. Deshmukh Sayli Sunil	Sbspm B.Pharm	2023	Rajarshi Shahu College of Pharmacy & Research, Pune	M.PHARM	8788296080
7	Mr, Lakde Ganesh Tukaram	Sbspm B.Pharm	2023	H.R. Patel institute of P'ceutical science & Research Shirpur Dhule	M.PHARM	8695637174
8	Mr. Masne Deep Dattatray	Sbspm B.Pharm	2023	R. C. Patel institute of P'ceutical science & Research Shirpur Dhule	M.PHARM	9146669186
9	Ms. Savadh Akanksha Ashok	Sbspm B.Pharm	2023	Indira college Of Pharmacy, Tathwade Pune	M.PHARM	9673642234

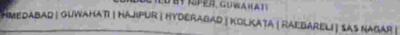


Principal

B.Phomacy College,

Ambajogal.

NIPER JOINT ENTRANCE EXAMINATION - 2023 CONDUCTED BY NIPER, GUWAHATI





Catrance Examination 2023 for Admission in MS (Pharm)/M.Tech (Pharm) / M.Tech/ M.Pharm/MHA (Pharm)/Ph.D/Integrated PG-PHD.

Provisional Seat Allotment Letter

! This is to inform that you have been allowed seat in NIPER Ahmedabad as per your Al Rank obtained in 23 for Admission in MS (Pharm)/M Tech (Pharm) / M Tech/ M Pharm/MBA (Pharm)/Ph.D/Integrated PG-

No.	11810090354	
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÷0	2309160143	
Name	GANGARDE KRUSHNA VISHNU	
nk	75 TANGSHING	بروار السمنات
plied	GENERAL	经
lotted	GEN	BAR
tted	M.S.(Pharm.) Natural Products	1
otted	NIPER Ahmedabad	
		Cardida

that my admission is provisional subject to the submission and verification of valid document mentioned

hat in case I am unable to submit the above mentioned certificates / documents for physical uvalidation within the time limit that is notified by the NIPER-JEE 2023, I shall not claim any equity on admission against the allotted scat. I also state that I am well aware of the fact that my admission is subject to the physical verification/validation of my original certificates otherwise my admission is liable to d & all the fees deposited by me shall be forfeited.

at if any falsified records are detected at any stage of admission or during the course of study & even after I y course, my admission to the course shall liable to be cancelled or the degree awarded by the NIPER shall be Further, I will be debarred from attending any course at NIPER for the next 05 (Five) years and in addition, a use under relevant section(s) of law in force may be initiated against me.

2 that I shall abide by the Rules & Regulations of the NIPER. I also hereby undertake that I shall accept the f the NIPER-JEE Committee-2023 as final if the seat allotted to me is taken back or if my admission is fue to submission of incorrect certificates/non—submission of certificates within the duration of time allotted to furnish the same.

eclare that I have submitted the result of qualifying degree exam / will submit the result of qualifying tificate as stated above, before the commencement of Final Semester examination at respective NIPER, my provisional admission shall be cancelled and full fees deposited by me shall be forfeited and no claim will y me.

nowledge that as per the norms of NIPER a fellowship is given to all successful candidates who are granted in different courses (except MBA (Pharm)) through NIPER JEE 2023 counseling. I understand if till the date I smit my result of qualifying examination and other required documents mentioned overleaf as per the NIPER norms, I would not be eligible for fellowship and further till that date I will not claim any fellowship from the

Signature of the Candidate

Provisional Seat Allotment Letter

Dear Candidate,

Congratulations! This is to inform that you have been allotted seat in NIPER Guwahati as per your Al Rank obtained in NIPER JEE-2023 for Admission in MS (Pharm)/M.Tech (Pharm) / M.Tech/ M.Pharm/MBA (Pharm)/Ph.D/Integrated PG-PHD.

Application No	11810111776		
Secret Code	2EDB563C642	148.5 11.5 11.5 11.5 11.5 11.5 11.5 11.5 1	
HallTicket No	2309160157		
Candidate's Name	GADADE AJELT ANGAD	#14	
All India Rank	81		
Category Applied	OBC		a part (a rip t.
Category Allotted	OBC		
Course Allotted	M.S.(Pharm.) Pharmaceutical Analysis	. 1	
Institute Allotted	NIPER Guwahati		Candidate's Signature

Undertaking:

- I undertake that my admission is provisional subject to the submission and verification of valid document mentioned overleaf.
- I declare, that in case I am unable to submit the above mentioned certificates / documents for physical
 verification/validation within the time limit that is notified by the NIPER-JEE 2023, I shall not claim
 any equity on account of admission against the allotted seat. I also state that I am well aware of the
 fact that my admission is completely subject to the physical verification/validation of my original
 certificates otherwise my admission is liable to be cancelled & all the fees deposited by me shall be
 forfeited.
- I agree, that if any falsified records are detected at any stage of admission or during the course of study & even after I pass out my course, my admission to the course shall liable to be cancelled or the degree awarded by the NIPER shall be taken back. Further, I will be debarred from attending any course at NIPER for the next 05 (Five) years and in addition, a criminal case under relevant section(s) of law in force may be initiated against me.
- I undertake that I shall abide by the Rules & Regulations of the NIPER. I also hereby undertake that I shall accept the decision of the NIPER- JEE Committee-2023 as final if the seat allotted to me is taken back or if my admission is cancelled due to submission of incorrect certificates/non –submission of certificates within the duration of time allotted as above, to furnish the same.
- I further declare that I have submitted the result of qualifying degree exam / will submit the result of qualifying degree/certificate as stated above, before the commencement of Final Semester examination at respective NIPER, otherwise my provisional admission shall be cancelled and full fees deposited by me shall be forfeited and no claim will be made by me.
- I have a knowledge that as per the norms of NIPER a fellowship is given to all successful candidates
 who are granted admission in different courses (except MBA (Pharm)) through NIPER JEE 2023
 counseling. I understand if till the date I do not submit my result of qualifying examination and other
 required documents mentioned overleaf as per the NIPER JEE 2023 norms, I would not be eligible for
 fellowship and further till that date I will not claim any fellowship from the NIPER.

(Signature of the Candidate)

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NIPER JOINT ENTRANCE EXAMINATION - 2023 CONDUCTED BY NIPER, GUWAHATI



AHMEDABAD | GUWAHATI | HAJIPUR | HYDERABAD | KOLKATA | RAEBARELI | SAS NAGAR |

NIPER Joint Entrance Examination 2023 for Admission in MS (Pharm)/M.Tech (Pharm) / M.Tech/M.Pharm/MBA (Pharm)/Ph.D/Integrated PG-PHD.

Provisional Seat Allotment Letter

Dear Candidate,

Congratulations! This is to inform that you have been allotted seat in NIPER Guwahati as per your AI Rank obtained in NIPER JEE-2023 for Admission in MS (Pharm)/M. Tech (Pharm) / M. Tech/ M. Pharm/MBA (Pharm)/Ph.D/Integrated PG-PHD.

Institute Allotted	NIPER Guwahati	1. [44]
Course Allotted	MS or M. Tech. Medical Devices	
Category Allotted	OBC	
Category Applied	OBC	
All India Rank	132	
Candidate's Name	AADE RAHUL TULSHIRAM	
HallTicket No	2313270086	
Secret Code	E9B47A6FFFF	
Application No	11810084927	

Undertaking:-

- I undertake that my admission is provisional subject to the submission and verification of valid document mentioned overleaf.
- I declare, that in case I am unable to submit the above mentioned certificates / documents for physical
 verification/validation within the time limit that is notified by the NIPER-JEE 2023, I shall not claim any equity on
 account of admission against the allotted seat. I also state that I am well aware of the fact that my admission is
 completely subject to the physical verification/validation of my original certificates otherwise my admission is liable to
 be cancelled & all the fees deposited by me shall be forfeited.
- I agree, that if any falsified records are detected at any stage of admission or during the course of study & even after I pass out my course, my admission to the course shall liable to be cancelled or the degree awarded by the NIPER shall be taken back. Further, I will be debarred from attending any course at NIPER for the next 05 (Five) years and in addition, a criminal case under relevant section(s) of law in force may be initiated against me.
- I undertake that I shall abide by the Rules & Regulations of the NIPER. I also hereby undertake that I shall accept the
 decision of the NIPER- JEE Committee-2023 as final if the seat allotted to me is taken back or if my admission is
 cancelled due to submission of incorrect certificates/non—submission of certificates within the duration of time allotted
 as above, to furnish the same.
- I further declare that I have submitted the result of qualifying degree exam / will submit the result of qualifying degree/certificate as stated above, before the commencement of Final Semester examination at respective NIPER, otherwise my provisional admission shall be cancelled and full fees deposited by me shall be forfeited and no claim will be made by me.
- I have a knowledge that as per the norms of NIPER a fellowship is given to all successful candidates who are granted admission in different courses (except MBA (Pharm)) through NIPER JEE 2023 counseling. I understand if till the date I do not submit my result of qualifying examination and other required documents mentioned overleaf as per the NIPER JEE 2023 norms, I would not be eligible for fellowship and further till that date I will not claim any fellowship from the NIPER.

(Signature of the Candidate)

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State Common Entrance Test Cell, Maharashtra State, Mumbai 8th Floor, New Excelsior Building, A.K. Nayak Marg, Fort, Mumbai-400001. (M.S.)

Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of Two/Three Year Full Time Post Graduation Technical Course In Pharmacy (M. Pharmacy/Pharm. D.(Post Baccalaureate)) for the year 2023 - 2024



Application ID: MPH23107		A lo show	dmission : Non Sponsored	
	Persona	Details		
Full Name	MUNDE KALYANI TUKARAM		100	
Nationality	Indian	Gend	er Female	
Date of Birth	17-04-2001	Annual Family Income (50,001 -	1,00,000
Category-Caste	NT 3 (NT-D)			
Religious Minority/Linguistic Minority	N.A			
PWD Type	N.A.			
Type of Candidature	Maharashtra State Candidate - Type	A		
EWS Status	EWS Status N.A. Orphan Status N.A.			
Seat Acceptance Fee is fille	ed by online payment of Rs. 10	000/-		
Paid Amount (₹) ₹ 1000/-	Payment Status			
Allotment Details		A STATE OF THE PARTY OF THE PAR		
	All India Merit Number	1250		
	Allotted Choice Code	637112610		
	Allotted Seat Type	GNTD	7	
	Preference No.	10		THE PERSON NAMED IN
Reporting Details				
Institute	Dr. D.Y. Patil College of Pharmacy , A	kurdi, Puns		
Tution Fees (₹)	0/-	Cou	rse 637112 Techniq	610-Quality Assurance ues
Development Fees (₹)	15214/-	Admission D	ate 21-09-2	1023
Other Fees (₹)	5108/-	Admission Ty	PR CAP RO	und 3
Total Fees (₹)	20322/-			
Remark	All documents are submitted.			

Declaration by Candidate: I hereby agree to conform to rules, acts and less enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will solve behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully undertake that to prove the Principal/Delinector of the institute, lor any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

Date:21-09-2023

Place:

Signature of The Candidate (MUNDE KALYANI TUKARAM)

INSTITUTE USE ONLY

Declaration by the College/Institute: We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two/Three Year Full Time Post Graduation Technical Course in Pharmacy (M. Pharmacy/Pharm. D. (Post Baccalaureate)) for the year 2023 - 2024 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Dr. D.Y. Patil College of Pharmacy , Akurdi, Pune

Signature of Institute Officer (6371)

Reported On:21-09-2023 04:22:52 PM Printed On :21-09-2023 04:22:55 PM Reported By:6371 Printed By:6371

Last Modified On :21-09-2023 04:22:52 PM

Last Modified By:6371





State Common Entrance Test Cell, Maharashtra State, Mumbai 8th Floor, New Excelsior Building, A.K. Nayak Marg, Fort Mumbal-400001.(M.S.)

Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of Two/Three Year Full Time Post Graduation Technical Course In Pharmacy (M. Pharmacy/Pharm. D.(Post Baccalaureate)) for the year 2023 -



2024 Mode of Admission : Non Sponsored Application ID: MPH23108973 Personal Details DESHMUKH SNEHA DIPAK **Full Name** Female Gender Indian Nationality **Annual Family** 15,001 - 50,000 Date of Birth 30-10-2000 Income (१) Category-Caste OPEN Religious N.A Minority/Linguistic Minority **PWD Type** N.A. Type of Candidature Maharashtra State Candidate - Type A **Orphan Status** Seat Acceptance Fee is filled by online payment of Rs. 1000/-Transaction order_Mc7sTbGL7yo0vi Successful Paid Amount (₹) ₹ 1000/-**Payment Status** Id **Allotment Details** 1091 All India Merit Number Allotted Choice Code 635881710 Allotted Seat Type EWS Preference No. Reporting Details Sinhgad College of Pharmacy, Vadgaon, Pune Institute 635881710-Pharmaceutics Course Tution Fees (₹) **Admission Date** 22-09-2023 Development Fees (₹) CAP Round 3 **Admission Type** Other Fees (₹) 8170/+ 30000/-Total Fees (*) Admitted Remark Declaration by Candidate: I hereby agree to conform to rules, acts and laws enforced by Government. 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 the institute/college will have rights to expel, rusticate me from the institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

Date:22-09-2023

Place:

punc

Signature of The Candidate (DESHMUKH SNEHA DIPAK)

INSTITUTE USE ONLY

Declaration by the College/Institute: We hereby declare that, we are admitting this Candidate to our College / Institute for First Year of Two/Three Year Full Time Post Graduation Technical Course In Pharmacy (M. Pharmacy/Pharm. D.(Post Baccalaureate)) for the year 2023 - 2024 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate. Colle

Seal of Sinhgad College of Pharmacy, Vadgaon, Pune

Reported On:22-09-2023 12:20:35 PM

Printed On :22-09-2023 12:20:37 PM

Signature of Institute Office* (6358)

Reported By:5358 Printed By:6358

Last Modified By:6358

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9/21/23, 12.00 FW

State Common Entrance Test Cell, Maharashtra State, Mumbal 8th Floor, New Excelsior Building, A.K. Nayak Marg, Fort, Mumbai-400001. (M.S.)

Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of Two/Three Year Full Time Post Graduation Technical Course In Pharmacy (M. Pharmacy/Pharm. D.(Post Baccalaureate)) for the year 2023 -



Mode of Admission: Non Sponsored Application ID : MPH23108237 Personal Details Full Name DESHMUKH SAYLI SUNIL Female Gender Nationality 50,001 - 1,00,000 Annual Family Income (₹) 20-09-2000 Date of Birth Category-Caste OPEN Religious Minority/Linguistic Minority PWD Type Type of Candidature Maharachtra State Candidate - Type A Orphan Status N.A. **EWS Status** Seat Acceptance Fee is filled by online payment of Rs. 1000/order_MbSFYf1uUeSm3a Transaction Id Successful ₹ 1000/-**Payment Status** Paid Amount (*) Allotment Details All India Merit Number Allotted Choice Code 636781710 **GOPEN** Allotted Seat Type Preference No. 5 Reporting Details Institute Rajarshi Shahu College of Pharmacy & Research, Tathawade, Pune Course 636781710-Pharmaceutics Tution Fees (₹) 44542/-**Admission Date** 21-09-2023 Development Fees (₹) Other Fees (₹) **Admission Type** CAP Round 3 Total Pees (2) 50000/-Remark admitted Declaration by Candidate: I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will no 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 the institute/college will have right to expel, nusticate me from the institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above. Date:21-09-2023 Signature of The Candidate

Place:

(DESHMUKH SAYLI SUNIL)

INSTITUTE USE ONLY

Declaration by the College/Institute: We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two/
Graduation Technical Course In Pharmacy (M. Pharmacy/Pharm. D. (Post Beccalaureate)) for the year 2023 - 2024 on verification of Candidate's In
paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate. le's Identity. The candidate ha

> Tathuwade Pune - 33.

Seal of Rajarshi Shahu College of Pharmacy & Research, 15.P.M.

Tathawade, Pune

Reported On:21-09-2023 12:59:05 PM

Printed On :21-09-2023 12:59:08 PM

Last Modified On :21-09-2023 12:59:05 PM

Signature of Institute Officer (6367)

PRINCIPAL

Tathawade, Pune -411 033. Last Modified By:6367





State Common Entrance Test Cell, Maharashtra State, Mumbai 8th Floor, New Excelsior Building, A.K. Nayak Marg, Fort, Mumbal-400001.(M.S.)

Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of Two/Three Year Full Time Post Graduation Technical Course In Pharmacy (M. Pharmacy/Pharm. D.(Post Baccalaureate)) for the year 2023 - 2024



Application ID : MPH23105150

	193139	Mod	a of Admit
Full Name	LAKDE GANESH TUKARAM	nal Details	e of Admission : Non Sponsored
Nationality	Indian	Gender	Male
Date of Birth	02-08-2001	Annual Family Income	50,001 - 1,00,000
Category-Caste	NT 2 (NT-C)	(5)	
Religious Minority/Linguistic Minority	N.A		
PWD Type	N.A.		
Type of Candidature	Maharashtra State Candidate	- Time A	4 191
EWS Status	N.A.	The second secon	
Seat Acceptance For the		Orphan Status	N.A.

Acceptance Fee is filled by online payment of Rs. 1000/-

Paid Amount (?) ₹ 1000/-**Payment Status** Successful Transaction Id order MX8V6LkbdVOR6Z **Allotment Details**

All India Merit Number 2969 Allotted Choice Code 519681710 Allotted Seat Type МІ-МН Preference No.

Reporting Details

H. R. Patel Institute of Phamaceutical Education & Research , Shirpur, Dhule Institute Tution Fees (₹) Course 519681710-Pharmaceutics Development Fees (₹) 10000/-**Admission Date** 22-09-2023 Other Fees (₹) 0/-Admission Type CAP Round 3 Total Fees (₹) 10000/-Remark Admission confirmed

Declaration by Candidate: I hereby agree to conform to rules, acts and laws enforced by Government. 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 college/institute/university/Government and the undertaking given above.

Date:22-09-2023

Shirple

Signature of The Candidate (LAKDE GANESH TUKARAM)

INSTITUTE USE ONLY

Declaration by the College/Institute: We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two/Three Year Full Time Post Graduation Technical Course in Pharmacy (M. Pharmacy/Pharm. D. (Post Baccalaureate)) for the year 2023 - 2024 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of M. Patel Institute of Phamaceutical Education & Research , Shirpur, Dhule Reported 01/22-09-2021 01:13:12 PM Last Modified-On :22 09-2023 01:13:12 PM

Signature of Institute Officer (5196) H. R. Patel Institute Reported By15196 Shirous Dist Disule (Reinted By:5196 Last Modified By:5196





State Common Entrance Test Cell, Maharashtra State, Mumbal 8th Floor, New Excelsior Building, A.K. Nayak Marg, Fort, Mumbal-400001.(M.S.)

Receipt-cum-Acknowledgement of Institute Level Admission as for Admission to First Year Of Two/Three Year Full Time Post Graduation Technical Course In Pharmacy (M. Pharmacy/Pharm. D.(Post Baccalaureate)) for the year 2023 - 2024



Application 10: MPH23102728

Personal Details 1						
Full Name	SAVADH	AKANKSHA ASHOK			7	
Nationality	Indian		Date of Birth	15-01-20	200	Section 18
Gender	Female		Annual Family Income (१)	9,00,001		
Category-Caste	OPEN					
Applied For EWS	No					THE STATE OF THE S
PH Type	N.A.				-	DANIEL STORY
Type of Candidature	Mahar	ashtra State Candi	date - Type A			
	English	Medium No		1		
Grad	luation	Institute				The late supply no
Gr	aduatio	n Course				
Institute level Fee Is	filled b	y online payment	of Rs. 1000/-			The state of the s
Faid Amount (7) 7 1000		Payment Status	Successful	Trac	saction Id	order_MhFqrftJE1Wva
Institute Details :			The state of the last	-		Pathanada Bineftin
	te Name	6360 - Chanakya Edut Aided - Non-Autonomi	ation. Soceity's, Indira ous - Non-minority)	College of		
Tution	Fees (₹)	0/-		se Name)-Pharmacology
Development Fees (₹)		0/-		ion Date	27-09-202	
	Fens (E)	0/*	Admiss	ion Type	Institute L	Iver acut
Other				Remark	THE RESERVE AND ADDRESS OF THE PARTY OF THE	

fully understand that the Principal/Director of the institute/college and the undertaking given above the rules prescribed by the college/institute/university/Government and the undertaking given above

Date:27-09-2023

Place :

Declaration by the College/Institute: We hereby declare that, we are admitting this Carcidate to our College / Institute for First Year Of Tou/Three Year Full Time Fost Graduation Technical Course In Pharmacy (M. Pharmacy/Pharm. D.(Post Baccalaureate)) for the year 2033-2024 per residence of Cardidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Chanakya Education. Socilty's, Indira College of Pharmacy, Tathawade, Pune

Signature of Institute Officer (6360)

(SAVADH AKANKSHA

Reported On: 27-09-2023 03:00:26 PM

Printed On : 27-09-2023 03:00:28 PM

Last Modified On 127-09-2023 03:60:26 PM

Reported Byt: 6360 Printed By:: 6360 Last Modified By:6360





State Common Entrance Test Cell, Maharashtra State, Mumbai 8th Floor, New Excelsior Building, A.K. Nayak Marg, Fort, Mumbai-400001. (M.S.)

Receipt-cum-Acknowledgement of Institute Level Admission as for Admission to First Year Of Two/Three Year Full Time Post Graduation Technical Course In Pharmacy (M. Pharmacy/Pharm. D.(Post Baccalaureate)) for the year 2023 -2024

Application to . senues



Personal Details :			Applicacio	on ID : MPH23105149			1	
Full N	lame	MASNE C	DEEP DATTATRAY					
Nation	ality	Indian		Date of Birth	14-08-20	001		
Ge	nder	Male		Annual Family Income (₹)	10,00,00)1 -		8
Category-C	Caste	OPEN					11.3	
Applied For	EWS	No						MARKET STATE
P)	1 Туре	N.A.					4	at .
Tyj Candida	pe of ature	Mahar	ashtra State Car	ndidate - Type A				5
		English	Medium No		i i			
	Grad	uation 1	Institute					111111
	Gr	aduation	n Course			-		
Institute leve	l Fee	is filled	by online payme	ent of Rs. 1000/-				
Paid Amount (₹)	₹ 100		Payment Status		Tran Id	saction	order	MhkxbbAXiHwEQ
Institute Details :							4	
	Institu	ite Name	5186 - R. C. Patel I Alded - Autonomou	Institute of Pharmaceut us - Linguistic Minority -	ical Educa Gujarathi)	tion and R	lesearch	Shirpur(Un-
	Tution	Fees (₹)	100000/-		rse Name	_	710-Phar	maceutics
Develo	pment	Fees (₹)	0/-	Admis	sion Date	28-09-2		
	Other	Fees (₹)	0/-	Admiss	sion Type	Against	CAP	
	Total	Fees (₹)	100000/-		Remark	Ok Adm	itted	Distance of the

Declaration by Candidate: I hereby agree to conform to rules, acts and laws enforced by Government. 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 the institute/college will have rights to expel, rusticate me from the institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

Date: 29-09-2023

Place:

Signature of Candidate (MASNE DEEP DATTATRAY)

INSTITUTE USE ONLY

Declaration by the College/Institute: We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two/Three Year Full Time Post Graduation Technical Course In Pharmacy (M. Pharmacy/Pharm. D.(Post Baccalaureate)) for the year 2023-2024 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

> Seal of R. C. Patel Institute of Pharmaceutical Education and Research, Shirpur

Reported On:29-09-2023 02:50:10 PM Printed On: 29-09-2023 02:50:12 PM

Last Modified On :29-09-2023 02:50:10 PM

Signature of Institute Officer REGISTRAR

R.C. Patel Inst. of Pharm. Edv & Research Shirput, Dist. Of GROSS Off SBY:: 5186

Printed By:: 5186

Last Modified By:5186





State Common Entrance Test Cell, Maharashtra State, Mumbai 8th Floor, New Excelsior Building, A.K. Nayak Marg, Fort, Mumbai-400001.(M.S.)

Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of Two/Three Year Full Time Post Graduation Technical Course In Pharmacy (M. Pharmacy/Pharm. D.(Post Baccalaureate)) for the year 2023 - 2024



Application ID: MPH23102727

Mode of Admission : Non Sponsored

Para		

Full Name APET RA) SATISH

Nationality Indian

Gender Male

Date of Birth 12-05-2000 Annual Family Income (

50.001 - 1.00.000

DPEN Category-Caste

Religious Minority/Linguistic Minority

PWD Type NA

Type of Candidature Maharashtra State Candidate - Type A

CWS Status

Orphan Status N.A.

Seat Acceptance Fee is filled by online payment of Rs. 1000/-

Paid Amount (?)

₹ 1000/-

Payment Status

Successful

Transaction Id

order_MfHMFhTT9192sb

Allotment Details

All India Merit Number

Allotted Choice Code

225357510

Allotted Seat Type

Preference No.

Reporting Details

Institute Channabasweshwar Pharmacy College (Degree), Latur

Tution Fees (₹)

Other Fees (2)

Total Fees (₹)

4920/-11080/-

16000/-

0/-

Course

225357510-Pharmaceutical

Admission Date

Quality Assurance 22-09-2023

Admission Type

CAP Round 3

Development Fees (₹)

Declaration by Candidate: I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of Colleges insteads, 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 the institute/college will have rights to expel, nisticate me from the institute, for any infringement of the rules prescribed by the college/institute/university/Government

Date:22-09-2023

Place:

INSTITUTE USE ONLY

Declaration by the College/Institute: We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two/Three rear Full Time Post Graduation Technical Course in Pharmacy (M. Pharmacy/Pharm. D.(Post Baccalaureate)) for the year 2023 - 2024 on verification of Candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of

Seal of Channabasweshwar Pharmacy College (Degree), Latur

Reported On: 22-09-2023 12:34:23 PM

Printed On :22-09-2023 12:34:26 PM

Last Modified On :22-09-2023 12:34:23 PM

Pharm

Signature of Institute Officer

Principal Channabaswes Reer Praffy act College (Degredeted for 2200)

Signature of The Candidate (APET RAJ SATISH)

FEES RECEIPT (BANK)

Panchakashri Shivachary Trust's

CHANNABASWESHWAR PHARMACY COLLEGE (PG)

Basweshwar Chawk, Latur, Phone No.: 02382-240192 Phone No.: 02382-243855

Received From

Apet Raj Satish-2023 (Open /ews) No.

FRB\22-23\65

Standard

1st Q.A. (Open-EBC/OBC/EWS)

Date : 22-Sep-23

Division

Roll No. : 0

Sr.	D		value.	-
1938 m	1000	MET PER	uta	135

Development Fund

Tution Fees

Amount

11,080.00 4,920,00

Received Thru : Cheque/DD no. drawn on Remarks

: (Receipt Subject to Realisation of Cheque.)

INR Sixteen Thousand only.

₹ 16,000.00

Narration

BEING AMT RECEIVED FOR FEES

Prepared By : ishwar

For: Channabasweshwar Pharmacy College (PG)

Scanned with CamScanner