

Application form No:

Faculty of Pharmacy
The Maharaja Sayajirao University of Baroda

APPLICATION FORM

FOR ADMISSION IN M. PHARM AT FACULTY OF PHARMACY, THE M S UNIVERSITY OF BARODA ON VACANT SEAT
AT INSTITUTE LEVEL (YEAR 2023-24)

To be filled by the applicant (in capital letters only)

Student's Name: - _____
(as per marksheet) (Surname) (Name) (Father's/Husband's Name)

Student's
Recent photo

Gender (Male/Female): _____ Category (GEN/SC/ST/SEBC/Other): _____

ACPC Application No: _____ ACPC MERIT NO:

Complete contact Address: _____

_____ Pin Code: _____

Student's Contact No: _____ Parent's contact No: _____

Email ID: _____

Qualifying Exam:

	Month & Year	Name of College & University	CGPA/Percentage
B.Pharm			
GPAT/PGCET			

Admission as per ACPC

Round	Branch	Name of College & University	Admission confirmed (Y/N)
1			
2			

Undertaking:

1. I declare that the information given above is to the true best of my knowledge.
2. I declare that, once I get admission at Faculty of Pharmacy, MSU, then I will cancel my earlier admission of M.Pharm at respective institute and submit the copy of cancellation letter to Faculty of Pharmacy, MSU
3. I shall submit all my original documents at the time of confirming seat allotment.

Date:

Place: _____ Name & Signature of Applicant _____ Name & Signature of Guardian

Encl: Self attested copies of the following documents must be attached with this application form.

1. ACPC Registration Form Indicating Merit no
2. Final year Marksheets of B.Pharm
3. Provisional Degree certificate
4. GPAT/PGCET Marksheet
5. School Leaving certificate

Application form Fees: ₹ 1000/- (Only for those who are not in merit of ACPC)