INSTITUTE OF PHARMACEUTICAL SCIENCES KURUKSHETRA UNIVERSITY KURUKSHETRA

(Established by the state Legislature Act XII of 1956) ("A" Grade, NAAC Accredited)

ADMISSION NOTICE: B.PHARMACY 3rd SEMESTER (LEET) 2013-14

Applications are invited for admission to B. Pharmacy 3rd semester (LEET) 2013-14 course. **Eligibility**: Diploma in Pharmacy with 50% marks (minimum pass marks for SC/ST) from a Institute approved by Pharmacy Council of India. Admissions will be made on the basis of merit of D.Pharmacy. Application Form is available on University Website www.kuk.ac.in Interested candidates may apply on prescribed performa to the Director, Institute of Pharmaceutical Sciences, KUK alongwith application processing fee of Rs.1000/- (Rs.250/- for SC/BC candidates of Haryana) in the form of DD in favour of the Registrar, KUK payable at Kurukshetra. Counseling will be held in the Institute as per schedule given below:

Last date for receipt of Application Form
 1st Counseling
 30.07.2013 by 5.00 p.m.
 06.08.2013 at 11.00 a.m.

3. Depositing Fee/Dues upto - 07.08.2013

4 2nd Counseling, if seats remain vacant - 12.08.2013 at 11.00 a.m.

5. Depositing Fee/Dues upto - 13.08.2013

Candidates must bring original documents, one set of attested photocopies and 3rd semester fee of Rs.36,000/- to be paid on the day of counseling. Admission Helpline/Enquiry No.01744-239617 on working days.

DIRECTOR

INSTITUTE OF PHARMACEUTICAL SCIENCES KURUKSHETRA UNIVERSITY KURUKSHETRA

(Established by the State Legislature Act XII of 1956) ("A" Grade, NAAC Accredited)

Sr.	No.	
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Application Form for Admission to B.Pharm. 3rd Sem. (2nd Year) (LEET) Course : 2013-14 LAST DATE FOR RECEIPT OF APPLICATION FORM : 30.07.2013 BY 5.00 P.M.

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((g) Wards of ESM ()							
((h) Dependent of Freedom Fighter						()	

11. Academic Record:

Exam	University/ Board/ Institute	Year of Passing	Roll No.	Subjects	Marks obtained	Max. Marks	% age of Marks

Instructions:

- 1. All the candidates have to bring all original documents alongwith fees and one set of attested photocopies of the same and required fee at the time of counseling.
- 2. Attach Photocopy of Certificate of D.Pharmacy/10+2 DMC/Haryana Domicile, whichever is applicable.

Declaration by the applicant:

I declare that entries made by me in this Application Form are true in all respects and in any case, any entry or information is found to be false, this shall entail automatic cancellation of my admission besides rendering me liable to such action as the university may deem proper.

I note that my admission to the university and my continuance on its rolls are subject to the provision of the university and any other rules and instructions, which may be issued from time to time. I shall abide by the rules of discipline and proper conduct, which may be framed in this regard. I am fully aware of the law regarding ragging as well as the punishment and that if found guilty on this account, I am liable to be punished appropriately.

I undertake that I shall not indulge in any act of ragging.

Signature of the Father/Mother/Gu	ıardian	Signature of the Applicant
DatePlace		

For office use

Admitted

Director,
Institute of Pharmaceutical Sciences