

APPLICATION NO:

ICET Code: KGRM

PGECET Code: KGRR1



KGR INSTITUTE OF TECHNOLOGY & MANAGEMENT

(Approved by A.I.C.T.E and Affiliated to Osmania University)
Rampally (V), Keesara (M), Medchal Dist. – 501 301. Telangana

1. NAME IN CAPITAL LETTERS (IN ENGLISH)

FIRST NAME

MIDDLE NAME

LAST NAME

SURNAME

Stamp Size
Photo

2. ADDRESS IN CAPITAL LETTERS (PERMANENT ADDRESS)

H.NO: / FLAT NO: _____

POST: _____

DISTRICT: _____

STATE: _____

PIN: _____

Phone Number (Student): _____ Parent Phone Number: _____

Aadhar Number : _____

3. Date of Birth : _____ Email Id : _____

4. Gender :- Male : Female: Nationality: _____

5. Community to which the applicant Belongs to :

SC: ST: BC: Sub Category: A B C D OC:

Sub Caste: _____

6. Religion: Hindu : Muslim: Christianity: Others (Specify): _____

7. Admission into the Department of MBA: M.Pharmacy : Ph.Analysis / Ph.Ceutics / Ph.Cology

| Qualification | Group | Name of the University/ Board | Passed Month & Year | Total Marks | Secured Marks | Percentage | Division |
|---------------|-------|-------------------------------|---------------------|-------------|---------------|------------|----------|
| OTHERS | | | | | | | |
| DEGREE | | | | | | | |
| INTER | | | | | | | |
| SSC | | | | | | | |

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8. Details of ICET / PGECET/GATE :

I) Hall Ticket No: _____ II) Rank: _____

9. Identification Marks of Applicant: 1. _____

2. _____

10. Local Area: OU/ S.V.U/ A.U/ Non Local: _____

11. Name of the Father/ Guardian / Husband: _____

12. Name of the Mother: _____

I Declare that the particulars given above are correct and I submit myself to the disciplinary and regulatory jurisdiction of the authorities of the college who are vested with the rights to exercise discipline under the act. The statues, and the ordinance and will strictly observe the rules and regulations that have been framed there under by the Govt. of T.S / A.I.C.T.E.

Signature of the Parent/ guardian

Signature of the Applicant

Enclosures:

| S. No. | Certificate | Yes/No | S. No. | Certificate | Yes/No |
|--------|------------------------------|--------|--------|---------------------------|--------|
| 1 | SSC Memo | | 9 | Migration Certificate | |
| 2 | SSC Bonafide | | 10 | Transfer Certificate | |
| 3 | Intermediate Memo | | 11 | Caste Certificate | |
| 4 | Intermediate Bonafide | | 12 | Income Certificate | |
| 5 | B.Pharmacy Sem Memos | | 13 | Residence/GAP Certificate | |
| 6 | B.Pharmacy Bonafide | | 14 | Ration Card Xerox | |
| 7 | B.Pharmacy CMM | | 15 | Aadhar Card Xerox | |
| 8 | Provisional Certificate / OD | | 16 | Bank Pass Book Xerox | |

FOR OFFICE USE ONLY

1. ELIGIBLE

2. ORIGINALS VERIFIED

| S. No. | Certificate | Yes/No | S. No. | Certificate | Yes/No |
|--------|------------------------------|--------|--------|---------------------------|--------|
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Superintendent

Head of the institution