Escent Institute
of Pharmaceutical
Sciences & Research

Sangaiprou, Airport Road, Imphal West, Manipur 795001

APPLICATION FORM

SESSION ..... – .....

Application No.: .....

Hostel Facility:
☐ Yes ☐ No

Course Applied For:
☐ B.Sc. MLT ☐ DMLT ☐ DOpT ☐ B. Pharm
☐ B.Sc. RIT ☐ DRIT ☐ DPT ☐ D. Pharm

University: ☐ MU

Paste recent passport sized photo

Name Of The Candidate Candidate's Signature
(in English capital letters, as per matriculation certificate, leaving one box blank after first & middle name.)

Date of Birth D D M M Y Y Y Y **Gender** M F

Religion ..... **Nationality** ..... **Marital Status** .....

Domicile ..... **Mother Tongue** ..... **Blood Group** .....

Father's Name
(in English capital letters, as per matriculation certificate, leaving one box blank after first & middle name.)

Mother's Name
(in English capital letters, as per matriculation certificate, leaving one box blank after first & middle name.)

Parent's/Guardian's Occupation: Father ..... Mother .....

Parent's/Guardian's Education: Father ..... Mother .....

Family Annual Income Rs. .....

Educational Qualification

Examination	Year of passing	School/ College	Name of Board/ University	Max. Marks	Marks Obtained	% of Marks/ Grade	Medium of Instruction

Permanent Address:
.....
.....
Distt. ..... PIN
State ..... Country .....

Correspondence Address:
.....
.....
Distt. ..... PIN
State ..... Country .....

Student Contacts:
Phone No.
E-mail .....

Parent Contacts:
Phone No.
E-mail .....

DECLARATION

I hereby declare that all statements made in the application are true, complete and correct to the best of my knowledge and belief. I also undertake that I have not submitted application for two different courses, I understand that in the event of my information being found untrue/ false/ incorrect or I do not satisfy the eligibility criteria, my candidature/ application will be cancelled/terminated without assigning any reason thereof.

Date:
Place: (Signature of Applicant)

IDENTITY CERTIFICATE

Affix photograph.

Seal of office & signature of the officer attesting this certificate should appear on the photograph

This is to certify that the details and photograph of Shri/Smt.....
.....
S/o, D/o, W/o.....
and resident of(R/O).....
who has applied for the course of.....
is verified and certified or correct and genuine.

Name of certifying Officer:.....
Designation of certifying Officer:.....
Signature of certifying Officer:.....

Seal:

(Note: Identity of the candidate should be certified by an officer not below the rank of Gazette officer/Principal of the school/College for where the candidate passed his 10th/Intermediate or graduation/Diploma along with name & designation seal of officer.)

LIST OF DOCUMENTS

Upload the following original documents scan copy.

1. High school (10th Standard) mark sheet and certificate (Yes/No)
2. Intermediate (12th Standard) mark sheet and certificate (Yes/No)
3. Transfer certificate (Yes/No)
4. Migration certificate (Yes/No)
5. Character certificate (Yes/No)
6. Medical Fitness certificate (Yes/No)
7. Caste certificate in case of SC/ST/OBC student (Yes/No)
8. Recent passport size coloured photograph (3 Nos) (Yes/No)
9. Aadhaar Card/PAN/Voter ID(For address Proof) (Yes/No)

OFFICE USE

SL. NO.	CHECKLIST FOR DOCUMENTS VERIFICATION	ATTESTED PHOTOCOPY (✓ or ✗)	ORIGINAL (✓ or ✗)
1	High school (10th Standard) mark sheet and certificate		
2	Intermediate (12th Standard) mark sheet and certificate		
3	Transfer certificate		
4	Migration certificate		
5	Character certificate		
6	Medical Fitness certificate		
7	Caste certificate in case of SC/ST/OBC student		
8	Aadhaar Card		
9	Recent passport size coloured photograph (3 Nos)		

Signature & Name of the Member of Admission Committee

1.

2.

Date:
Place: