



Paste Your  
Photo  
Here

**Shree Krishna Institute of Pharmacy**  
**Ratnamani Scholarship for Pharmacy Students**  
**APPLICATION FORM**

<b>Name</b>		
<b>Present Address</b>		
<b>Permanent Address</b>		
<b>Email id:</b>		
<b>Contact No.</b>	(R)	(M)

**Scholarship Request**

<b>Name of the Course</b>		<b>Year</b> (1 <sup>st</sup> /2 <sup>nd</sup> /3 <sup>rd</sup> /4 <sup>th</sup> )	
<b>Roll No.</b>		<b>Date of Birth</b>	
<b>Category of Scholarship</b>	Merit / Attendance	<b>Sex (M/F)</b>	

**Academic Record (Starting from 12<sup>th</sup> Std.)**

<b>Course</b>	<b>Board/University</b>	<b>Year of Passing</b>	<b>Percentage</b>	<b>Rank (if Any)</b>	<b>Attendance (%)</b>

**Important**

- The student is expected to fill in all the required information. Incomplete or misleading form would not qualify for consideration.
- Copy of Fees Payment receipt at Shree Krishna Institute of Pharmacy
- Copy of (if any) awards/scholarship/grants received from any other institute/organisation
- Any additional information you feel supports your application
- Paste a passport-size colour photo in the box shown on the form
- Attendance Certificate from Principal, Shree Krishna Institute of Pharmacy
- Marksheet of Examination passed during previous year countersigned by Principal, Shree Krishna Institute of Pharmacy.

- Once filled application form and submitted to us with documents then it does not assure any guarantee for scholarship. Only deserving and best applicants shall be granted. Panel's Decision will be Final and cannot be challenged by the applicant or any other third party

I hereby agree to all the terms and conditions of the Ratnamani's Scholarship for Pharmacy Students

Date:

Place:

\_\_\_\_\_  
(Signature of Student)

-----  
**FOR OFFICE USE ONLY**

Registered in Course:	New Student: Yes/No
All required documents received:	Yes/No
Course Enrolment fees paid in Full:	Yes/No
Scholarship Committee decision:	
Applicant short-listed : Yes/No	
Final decision: Reject <input type="checkbox"/> Accept <input type="checkbox"/> Amount granted:	
Successful applicant notified:	
Notes:	

(Seal and Signature)

The Principal

Shree Krishna Institute of Pharmacy