



**COLLEGE OF PHARMACY**  
**PGIMS: Pt. B.D SHARMA UNIVERSITY OF HEALTH SCIENCES**  
**ROHTAK**

Email: [principal.copharmacy@uhsr.ac.in](mailto:principal.copharmacy@uhsr.ac.in)

☎ :01262-298104



No/COP/2024/

Date:

**Subject:- Institutional level counseling for admission against vacant seats in B. Pharmacy 1<sup>st</sup> semester**

Online applications through E-mail ([sdpgips@gmail.com](mailto:sdpgips@gmail.com)) are invited for filling of vacant seats of B. Pharmacy 1<sup>st</sup> Sem. for the session 2024-25 (Application form attached). Last date of application is 11.11.2024 by 12.30 PM. Following is the vacancy position of seats.

Sr. No.	Category	No. of seats
1.	AIC	05
2.	HOGC	04
3.	HOGC (FF)	01
4.	SC	02
5.	SC (FF)	01
6.	TFW	01
7.	EWS	02
8.	BC	02
9.	PH	01

Number of vacant seats may vary due to withdrawal of admission, if any.

No application shall be entertained by any other mode except e-mail. Merit list shall be displayed on 13.11.2024 on [www.uhsr.ac.in](http://www.uhsr.ac.in).

Physical counseling shall be conducted at 10.00 AM on 14.11.2024. Admitted student shall submit relevant documents and requisite fee on 14.11.2024. The eligibility and other details shall remain same as mentioned in the prospectus available at [www.hstes.org.in](http://www.hstes.org.in). If candidate had not deposited his/her counselling fee of Rs.500/- earlier with HSTES, then he/she shall deposit the counselling fee in the account of institute at the time of admission.

The student desirous of getting admission shall bring all original documents and required fee of Rs.9,750/- failing which admission shall not be offered.

The admission shall be conducted on the basis of merit rank given by HSTES and only thereafter on the basis of inter-se-Merit of percentage of aggregate marks of qualifying examination (with Physics, Chemistry, Biology/Maths and English) in a fair and transparent manner.

Sd/-  
Principal  
For Director



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Application Form-Bachelor of Pharmacy Admission-2024

1. Full name (in block letter)..... Merit Rank (HSTES) .....
2. Sex Male \_\_\_\_\_ Female \_\_\_\_\_ Transgender \_\_\_\_\_
3. i) Father's Name (in block letter) \_\_\_\_\_  
ii) Mother's Name (in block letter) \_\_\_\_\_
4. Date of Birth \_\_\_\_\_
5. Do you want to be considered in any of the reserved Yes or No  
If Yes mentioned the name of the reserved category (ies) in order of preference  
EWS/SC/BC(A)/BC(B)/PHB/PHL/ESM/Dependent of FF/ \_\_\_\_\_  
Annual income (as per income certificate of 2024) in case of EWS,TFW and BC category \_\_\_\_\_

6. Full Postal address (in block letter)  
\_\_\_\_\_  
\_\_\_\_\_

Mobile No. \_\_\_\_\_ Email id \_\_\_\_\_

7. Details of studies of 10<sup>th</sup>, 10+2 classes:

Name of Class	Name of School/College where studied	Roll No.	Month and year of passing the exam.	Name of board/Uni.	Result/Marks obtained	Max. Marks	Percentage
10 <sup>th</sup>							
10+2(Aggregate of five subjects)							

8. Details of marks obtained in 10+2 or equivalent exam:-

Subject	Max. Marks	Marks obtained	Percentage
Physics			
Chemistry			
Biology/Mathematics (which ever is higher)			
_____(Name of fifth subject to be mentioned)			
Grand Total			

Declaration:-

1. The information given in the application is absolutely and true.
2. If at any time subsequent to my admission, it is discovered that any information given in this application or in the attached certificate or in documents produced here after is false, I may be removed from the college and all fees paid by me confiscated. The authorities may also take any further action against me or my father/guardian as it deem fit.
3. List of documents attached. \_\_\_\_\_

Signature of Father/Guardian

Date

Place

Signature of applicant

Date

Place