

Whether the candidate is Appearing for

Regular Examinations

Supplementary Examinations

Month & Year of Examination

H.T.No

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Name : (As per SSC Certificate)	
Father's Name	
Mother's Name	
Date of birth (As per SSC): (DD/MM/YYYY)	

Subjects for which registration is required:

Theory	Practical
1.MPA101T Modern Pharmaceutical Analytical Techniques <input type="checkbox"/>	6. MPA105P Pharmaceutical Analysis Practical-I – Practical <input type="checkbox"/>
2. MPA102T Advanced Pharmaceutical Analysis <input type="checkbox"/>	
3. MPA103T Pharmaceutical Validation <input type="checkbox"/>	
4. MPA104T Food Analysis <input type="checkbox"/>	

Total Number of Theory Papers Registered :

Total Number of Practical Papers Registered :

Details of Examinations Fee Paid:

Receipt No.	Date	Amount (Rs.)

Certified that the above information is CORRECT and Filled by me.

Signature of the Candidate: