





### IMPORTANT POINTS TO NOTE WHILE FILLING UP & SUPPORTING DOCUMENTS REQUIRED: -

- All columns must be filled up and no column should be left blank.
- 2) Application must be filled up in candidate's own handwriting.
- 3) Students scoring 80% and above from Madhyamik level can apply.
- 4) For any query, call us at 8697117946 / 033-24625544

#### The following supporting documents should be submitted along with the application:

- 1) Certificates and marksheet showing marks secured from Madhyamik (10th std.) and onwards.
- 2) Income of parents certified by the revenue authorities.
- 3) Two recent color passport size photographs (non-attested) of applicant
- 4) Proof of admission to the course and the tuition fee paid/payable per annum duly certified by the institution authority.
- 5) Copy of the SBI Pass book of applicant

#### Last date of form submission is 31st August 2019

Full Name (E	Block Letters): - SOMNATH MI	UDI CO
Male /Femal	MALE	
Date of Birth	(dd/mm/yyyy):- 23/09/200	00
SBI a/c no. o		7541 (CANARA BANK)
P.S =>	ddress:- VILL > BHELAIDIH PURULIA MUFFASIL, DIST	, ROS SENERA AMRA,
Present Addr	D-29 JADAVPUR UNIVERS	SITY, MAIN HOSTEL, DEC BLOCK
	D-29	HTY, MAIN HOSTEL, DEC BLOCK
	D-29	Name and Relationship
Contact detail	D-29	
Contact detail Sl. No.	D-29 s: Contact No.	Name and Relationship



Annexure A

To, The Secretary, Mukti, 22 Canal Side Road, Garia, Kolkata - 700084

To whom it may concern that

L hereby declare that, SOMNATH MODI is a bonafide student of JADAVPUR UNIVERSITY (institution) and is pursuing PHARMACEUTICAL TECHNOLOGY (class/year with stream).

Considering his/her family economic condition, it would be a great help if MUKTI helps this needy student to shape his/her future in a better way.

Thanking You,

S. G. Sarkar Jt. Registrar

JADAVPUR UNIVERSITY

Signature of Head of the Institution

With institution seal

Date: 09-12-2-19

Phone no. of Institution:

033 2457 6666



# Questionnaire (Please tick carefully, any wrong answer will cause your application will stand canceled) $$\operatorname{YES}$=\operatorname{NO}$$

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# 2 EDUCATION DETAILS:

Class	Name of the Institution			Year of passing	% Marks obtained	
	GHONGA 1			9017	74.71	
H.S. (10+2)	MATARA	A CONTRACTOR OF THE PARTY OF TH		2019	77-8	
Under Graduate						
Post-Graduate						

#### > 3. CURRENT EDUCATION DETAILS:

Course Name:	B. PHARM
Department:	PHARMCEUTICAL TECHNOLOGY
Institution Name:	JADAUPUR UNIVERSITY
Institution Address:	KOLKATA, JADAVPUR
Name of the Entrance test with RANK No:(if applicable)	WBJEE (17737) (ST RANK - GI)
Year Appeared: -	2019
Duration of the course:	D
Year of Admission:	2019
Year of completion (must specify month & year)	2623, June
If the candidate received any stipend/scholarship/ or any other Govt, scheme. If yes, please specify with name, nature of scholarship and amount in Rs.	NO
Expense per Year	i) Admission and Institution fee: Rs. 710/= (5000/= for first firme 5710/= set autofrace) ii) Books: Rs
	iv) Private tuition fee: Rs



#### 4. FAMILY DETAILS:

Relation	Full Name	Age	Occupation	Education	Source of funding (if studying)	Annual Income
Father	LATE FAHIBHUSHAN MUM					Mil
Mother	SARASWATI	50+	caus casually			36000/-
Brother(s)	AMAR MUDI	11	stulend	2		ше
Sister(s)	ANJALI	15+	STUDENT	N		mL

### > What is your future aim?

I want to do government Jab.

#### DECLARATION BY THE APPLICANT: -

L hereby declare that all the above information furnished by me is true. In case, any discrepancy is noticed, MUKTI has every right to terminate my sponsorship. I declare that my character and behavior will be exemplary and I shall maintain high scholastic standards and values, thereby setting an example for others. I will inform MUKTI of all changes in the course of my sponsorship. I will also attend any kind of seminar/ workshop/ meeting as will be informed to me. Failing to do so will result in cancellation of my sponsorship.

Place: Jadan Purp

Date: 6/12/2019

Signature of the applicant:

Sommath Mudi

## > DECLARATION BY PARENT/GUARDIAN: -

I, hereby declare that the above information furnished by my ward is true and there is no factual error. I am fully responsible for the accuracy of the information furnished in the application. In case of any discrepancy, I agree to refund the money received as sponsorship to MUKTI. I am also fully aware of the conditions pertaining to continuity of sponsorship.

PURULIA Place:

3/12/2019

Date:

3/12/2019

Signature of Parent/Guardian: