



# BOMMA INSTITUTE OF PHARMACY

(Approved By A.I.C.T.E., New Delhi, Affiliated to J.N.T.U., Hyderabad)

Beside Bomma Institute of Technology & Science, **ALLIPURAM**, Khammam - 507 318.

**Ph: 08742 - 645671, 323887, 323997.**

## BIO - DATA

1. Name of the Candidate	:	.....	
Male / Female	:	.....	
2. Father's Name	:	.....	
occupation	:	..... Annual Income:.....	
3. Date of Birth	:	..... Age :.....	
4. Nationality	:	..... Religion.....	
5. Present Contact Address	:	.....	
	:	.....	
6. Telephone No.	:	(off)..... (Resi) :..... (Mobile).....	
7. Permanent Address	:	.....	
	:	.....	
Parent / Phone No	:	..... (Mobile).....	
8. Nearest Stations	:	(Railway) ..... (Bus).....	
9. EAMCET - 20	:	Rank :..... Hall Ticket No:.....	
10. Caste (OC/SC/ST/BC)	:	..... Sub Caste.....	
Category	:	(EBC / PHC / Minority / NCC / Sports / Others).....	
11. Fee Type	:	Convener / Management / Spot :.....	
12. Whether He / she is in receipt of any scholarship	:	.....	
(Please specify whether the scholarship certificate is enclosed. Yes / No)	:	.....	
13. Branch of Admission	:	.....	
14. Fee Receipt / Chailan No.	:	..... Rs..... Bank..... Date.....	
15. College Admission No.	:	..... Date..... H.T.No.....	
16. Other Particulars, if any	:	.....	
17. Identification Marks	1:	.....	
	2:	.....	
18. Date of Counseling	:	..... Date of Reporting.....	
Place :			
Date :			

Signature of the Candidate

Signature of the Principal



We have gone through the instructions on page - 4 and will abide by all the rules regulations of the institute failing which, the Institute may take any action deemed necessary on the matter.

The above Information is noted  
by me and I assure that my  
ward abides by the regulations

SIGNATURE OF THE STUDENT

NAME

RANK

ADMISSION NO.

PHARMACY BRANCH.

Signature of the Parent / Guardian

Date :

Address :

I will pay the total fee stipulated by the college authorities from time to time during the beginning of every academic year (by August every year.) I will be responsible for the conduct of my ward during his/her study in the institute. I shall visit the institute at regular intervals to enquire about my ward's progress and conduct.

Date :

Signature of the  
Parent / Guardian

### **UNDERTAKING WITH REGARD TO PAYMENT OF TUITION FEE TO BE GIVEN BY ALL CANDIDATES**

To  
The Principal,  
**BOMMA INSTITUTE OF PHARMACY**  
**ALLIPURAM, KHAMMAM - 507 318.**

Sir,

I..... S/o. D/o..... having  
been admitted into 1st year Pharmacy Class { ..... Branch} at Bomma Institute of  
Pharmacy during the academic year ..... am aware that, if I discontinue my  
studies at Bomma Institute of Pharmacy whatever may be the reason for discontinuation, I will pay the full amount of  
tuition fee that would have been paid by me, had I continued to study my course until completion. If I fail to pay the fee  
my original certificates could be confiscated and Transfer Certificate need not be issued to me. Further the college can  
take any other action / steps on me that it deems fit for recovery of fee due from me.

Yours faithfully,

I have noted the subject  
matter of this undertaking  
and shall comply with it

SIGNATURE OF THE STUDENT

NAME

RANK

ADMISSION NO.

PHARMACY BRANCH.

Signature of the Parent / Guardian





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## **Instructions to the candidate and undertaking to be signed by Student and Parent**

1. The student is expected to be regular for their class work and should conduct themselves in a disciplined manner. They should abide by such rules of discipline and conduct as stipulated by the Institute from time to time.
2. The conduct of the student should be exemplary, not only in the premises of the College but also outside. This will help maintaining prestige and status of the Institute.
3. Ragging is prohibited. Any student participating in ragging will be summarily expelled from the institute. The first year students are advised to meet confidentially, the principal or other teachers if they are subjected to ragging by the seniors / others. This will help us in taking the menace which is consolable offence as per the Presidential order. The police can also act on their own if they detect ragging even inside the premises of the college. The recent Act of A.P. Legislative specifies severe punishment for indulging in or abetting ragging.
4. The student shall not object if their parents or guardians are contacted regarding their indiscipline, irregularity in attending classes, default in payment of fees and poor performance or failure in Examinations or any other matter of concern.
5. Hostel Facility is available in the campus.
6. The college will not defray any expenses for the out - station Educational Tours. With regard to out - station tours they may approach the concerned Head of Department for necessary preparations and organisation of the tours. The outstation or local tours are always accompanied by teachers.
7. The Office Bearers of the Students association are nominated on the basis of merit in the University Examinations (EAMCET rank in the case of first year). No elections are permitted in the college.
8. The student should inform any changes in the addresses of their parents / guardians in the Academic and Examination section.
9. Student is not permitted to resort to strikes and demon- stations within the college. Participation in any such activity shall automatically result in dismissal from the college. Any problems they face can represent to the concerned Heads of the Departments and the Principal through their class representatives.
10. The Institute premises and buildings should be kept clean. Writing or sticking - up posters and notices on the building walls is strictly prohibited.
11. The Institute has full powers to suspend, line, rusticate or take any action which is deemed necessary in the case of any indiscipline on the part of the students.
12. The academic regulations of J.N.T. University to which our college is affiliated are binding on me.

Signature of the parent / Guardian

Signature of the student



## UNDERTAKING FROM B.C / EBC CANDIDATES

I have taken admission into Pharmacy in Bomma Institute of Pharmacy, Allipuram, Khammam under B.C / EBC Category. I am aware that I may get the scholarship from Social Welfare Department if I satisfy the condition that my Parent's Income is less than stipulated per annum. I am also aware that this scholarship is sanctioned by the Government of A.P. on reimbursement basis. I hereby undertake that I shall pay the tuition fee intime even if there is delay in the sanction of scholarship.

I shall pay the fine, if donot pay the tuition fee. My hall ticket can be withheld by the Institute in case of defaults in the payment of tuition fee.

The above information is noted by me

SIGNATURE OF THE STUDENT

NAME

RANK

ADMISSION NO.

PHARMACY BRANCH

SIGNATURE OF THE  
PARENT / GUARDIAN

ADDRESS :

## UNDERTAKING FROM SC / ST CANDIDATES

I have taken admission into Pharmacy in Bomma Institute of Pharmacy, Allipuram, Khammam under SC / ST Category. The payment of tuition fee as my Parent's Income is less than stipulated amount per year. In the event if I am not granted scholarship due to any reason or the other, I shall pay the tuition fee on my own. If I fail to pay the tuition fee, my hall ticket can be withheld.

The above information is noted by me

SIGNATURE OF THE STUDENT

NAME

RANK

ADMISSION NO.

PHARMACY BRANCH

SIGNATURE OF THE  
PARENT / GUARDIAN

ADDRESS :