

GEETADEVI KHANDELWAL INSTITUTE OF PHARMACY,  
GODBOLE PLOTS, AKOLA - 444 002

**STUDENTS COUNSELLING**

SECOND YEAR D.PHARM  
YEAR

1. Full Name:- \_\_\_\_\_

2. Local Address:- \_\_\_\_\_

\_\_\_\_\_

Telephone No. with STD Code:- \_\_\_\_\_

3. Details of Room Partners if any:- \_\_\_\_\_

\_\_\_\_\_

4. Permanent Address:- \_\_\_\_\_

\_\_\_\_\_

Telephone No. with STD Code:- \_\_\_\_\_

5. Father's Qualification:- \_\_\_\_\_

Fathers' Occupation:- \_\_\_\_\_

Mother's Qualification:- \_\_\_\_\_

Mother's Occupation:- \_\_\_\_\_

Brother's Qualifications:- 1) \_\_\_\_\_ 2) \_\_\_\_\_

Brother's Occupations:- 1) \_\_\_\_\_ 2) \_\_\_\_\_

Sister's Qualifications:- 1) \_\_\_\_\_ 2) \_\_\_\_\_

6.

Examinations	Aggregate Marks/Out of	PCB/M
S.S.C.		
H.S.S.C.		
Other Qualification / D.Pharm I Year		

7. Fluency in Spoken & Written English:- Excellent / Good / Moderately Good /

Fair / Poor / Very Poor

8. Interest in Higher Studies:- B.Pharm / M.Pharm / Ph.D. / None

9. Manners:- Highly Pleasant / Pleasant / Moderately Pleasant / Moderately Unpleasant /

