

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

STUDENTS COUNSELLING

FIRST 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		

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

