

Dr. Sanjay D. Patil
President

Padmashree Dr. D. Y. Patil
Founder

Shri. Satej D. Patil
Vce-President & Chairman

Dr. N. S. Vyawahare
Principal

Ref. No. : DYPCOP/
Date :

5.2.1
PROOF- SUPPORTING DATA FOR
HIGHER EDUCATION
B. PHARM
2019-2020

SUMMARY

Sr. No.	Name of the Student	Name of the College	Page No
1	Aswar Kailas	Indita College Tathawade	02
2	Bandal Ashish	DF College, Shirur, Pune	04
3	Vaishnavi Bhosale	NIPER, Hyderabad	06
4	Mukti Dakhore	MITCON, MBA	08
5	Madhuri Gupta	IIPH, Jugarat	09
6	Saloni Kadu	Balaji MBA	10
7	Vishal Kalaskar	ICT Mumbai	11
8	Priyanka Kashide	SBI Recruitment Exam	12
9	Padmanabh Khoptikar	NIPER, Hyderabad	17
10	Chaitrali Koli	IELTS, Canada	20
11	Momin Shahanur	Sinhgad College, Kondhwa	21
12	Pranjali Parakhe	DYPIPSR Pimpri, Pune	22
13	Anam Pathan	DYPIPSR Pimpri, Pune	23
14	Gurunath Pimple	Competitive Exam	24
15	Snehal Ranjane	SIES, MBA, Pune	25
16	Sanjay Ubale	NIPER, Mohali	27





सत्यमेव जयते



GOVERNMENT OF MAHARASHTRA
State Common Entrance Test Cell, Maharashtra State,
Mumbai
8th Floor, New Excelsior Building, A.K. Nayak
Marg, Fort, Mumbai-400001. (M.S.)
Seat Acceptance Status Form for Admission to First Year Of
Two Year Full Time Post-Graduate Course In Pharmacy (M.
Pharmacy / Pharm. D. (Post Baccalaureate)) for the year
2020 - 2021



Application ID : MPH20101360		Version No : 1	
Personal Details			
Full Name	ASWAR KAILAS SONAJI		
Gender	Male	Date of Birth	25-11-1997
Type of Candidature	Maharashtra State Candidate - Type A		
Category	SC -Chambhar	Admission Category	SC - Chambhar
Linguistic Minority	N.A	Religious Minority	N.A
Person with Disability	N.A.		
EWS	N.A.	Orphan	N.A.
Qualifying Exam	SSC	SSC Aggregate	75.45 %
Qualifying Exam	HSC	HSC Aggregate	74.31 %
Qualifying Exam	Bpharmacy (Passed)	Bpharmacy Aggregate	65.58%
GPAT Examination Details			
GPAT Roll No	MR2202103426	GPAT Score	90
Merit Status			
All India Merit No		1889	
Provisional Allotment Details for CAP Round - I			
Institute Allotted	6360-Chanakya Education. Society's, Indira College of Pharmacy, Tathawade, Pune		
Course Allotted	Pharm.D. (Post Baccalaureate)		
Choice Code Allotted	636010110		
Seat Type Allotted	GSC	Pref No Allotted	9
Seat Acceptance Details			
Seat Acceptance Status:		Freeze	
Seat Acceptance Confirmation Details:		Confirmed	
Seat Acceptance Payment Details			
Payment Status	Successful	Paid Amount	₹ 1000/-

Declaration : I have read all the rules of admission and on understanding these rules ,I have filled this Seat Acceptance form for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharmacy / Pharm. D. (Post Baccalaureate)) for the year 2020 - 2021. The information given by me in this application is true to the best of my knowledge & belief. If at later stage, it is found that i have furnished wrong information and/or submitted false certificate(s), i am aware that my admission stands cancelled and fees paid by me will be forfeited. Further i will be subject to legal and/or penal action as per the provisions of the law.

Date: 16-01-2021

Place :

Signature of Candidate

(ASWAR KAILAS SONAJI)



Confirmed On: 13-01-2021 04:57:14 AM	Confirmed By: MPH20101360
Printed On : 16-01-2021 07:51:03 AM	Printed By: MPH20101360
Last Modified On : 13-01-2021 04:57:14 AM	Last Modified By:

IMPORTANT INSTRUCTIONS :

1. Check the allotment made in the CAP Round I through candidate's Login & Verify the correctness of the credentials used in seat allotment made to him/her in CAP round I as per the Rules & Regulations.
2. Candidate shall ensure through login that his/her claims related with Qualifying Marks, category, gender, reservation, special reservation made by himself/herself in the applications form are correct and the relevant documents uploaded to substantiate his/her claims are authentic and correct.
3. After ensuring the correctness of the allotment, candidates shall pay the seat acceptance fee through online mode for the purpose of accepting the allotted seat.
4. Allotment is made to the candidate based on the claims made by him/her in the applications form. If candidate found that the claim made by him is not correct during self verification of the allotment, and if he wants to correct the error/discrepancy, the candidate shall report the grievance by e-Scrutiny center without fail.
5. In later stage, if it is found that the seat allotted to the candidate on the false claims made in the application by the candidate, then such allotment/admission taken in the allotted institute shall be cancelled automatically.
6. Reporting dates for admission in the allotted Institute **11-01-2021 to 13-01-2021 Upto 05.00 P.M**

URL: http://cet20.mahacet.org.in/cet2020/mpharm20/index.php/candidateSelfArc/rec_arc_fr_sl_ft_status?application_id=MTAxMzYw&rnd=MQ==



सत्यमेव जयते



GOVERNMENT OF MAHARASHTRA
State Common Entrance Test Cell, Maharashtra State,
Mumbai
8th Floor, New Excelsior Building, A.K. Nayak
Marg, Fort, Mumbai-400001. (M.S.)
Seat Acceptance Status Form for Admission to First Year Of
Two Year Full Time Post-Graduate Course In Pharmacy (M.
Pharmacy / Pharm. D. (Post Baccalaureate)) for the year
2020 - 2021



Application ID : MPH20101298 **Version No : 1**

Personal Details

Full Name	BANDAL ASHISH GORAKSHNATH		
Gender	Male	Date of Birth	18-08-1997
Type of Candidature	Maharashtra State Candidate - Type A		
Category	OPEN	Admission Category	OPEN
Linguistic Minority	N.A	Religious Minority	N.A
Person with Disability	N.A.		
EWS	N.A.	Orphan	N.A.
Qualifying Exam	SSC	SSC Aggregate	81.20 %
Qualifying Exam	HSC	HSC Aggregate	75.38 %
Qualifying Exam	Bpharmacy (Passed)	Bpharmacy Aggregate	70.96 %

GPAT Examination Details

GPAT Roll No	MR2202102835	GPAT Score	130
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Merit Status

All India Merit No	753
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Provisional Allotment Details for CAP Round - I

Institute Allotted	6879-Loknete Shri. Dadapatil Pharate College of Pharmacy, At Post Manadavgan Pharata, Tal. Shirur, Dist. Pune		
Course Allotted	Pharmacology		
Choice Code Allotted	687982110		
Seat Type Allotted	GOPEN	Pref No Allotted	1

Seat Acceptance Details

Seat Acceptance Status:	Freeze
Seat Acceptance Confirmation Details:	Confirmed

Seat Acceptance Payment Details

Payment Status	Successful	Paid Amount	₹ 1000/-
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Declaration : I have read all the rules of admission and on understanding these rules ,I have filled this Seat Acceptance form for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharmacy / Pharm. D. (Post Baccalaureate)) for the year 2020 - 2021. The information given by me in this application is true to the best of my knowledge & belief. If at later stage, it is found that i have furnished wrong information and/or submitted false certificate(s), i am aware that my admission stands cancelled and fees paid by me will be forfeited. Further i will be subject to legal and/or penal action as per the provisions of the law.

Date: 10-03-2021	Signature of Candidate (BANDAL ASHISH GORAKSHNATH)
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Place :



Confirmed On:13-01-2021 05:13:41 PM

Confirmed By:MPH20101298

Printed On :10-03-2021 03:10:02 PM

Printed By:MPH20101298

Last Modified On :13-01-2021 05:13:41 PM

Last Modified By:

IMPORTANT INSTRUCTIONS :

1. Check the allotment made in the CAP Round I through candidate's Login & Verify the correctness of the credentials used in seat allotment made to him/her in CAP round I as per the Rules & Regulations.
2. Candidate shall ensure through login that his/her claims related with Qualifying Marks, category, gender, reservation, special reservation made by himself/herself in the applications form are correct and the relevant documents uploaded to substantiate his/her claims are authentic and correct.
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5. In later stage, if it is found that the seat allotted to the candidate on the false claims made in the application by the candidate, then such allotment/admission taken in the allotted institute shall be cancelled automatically.
6. Reporting dates for admission in the allotted Institute **11-01-2021 to 13-01-2021 Upto 05.00 P.M**

URL: http://cet20.mahacet.org.in/cet2020/mpharm20/index.php/candidateSelfArc/rec_arc_fr_sl_ft_status?application_id=MTAxMjk4&rnd=MQ==



National Institute Pharmaceutical Education and Research (NIPER)

Ahmedabad, Guwahati, Hajipur, Hyderabad, Kolkata, Raebareli, S.A.S. Nagar

NIPER Joint Entrance Examination 2020 - Master's Program

Provisional Seat Allotment Letter

Dear Candidate,

Congratulations! This is to inform you have been allotted following program as per your choice preference and AI Rank for NIPER JEE 2020 for M.S. (Pharm.)/ M.Pharm./ M.Tech.(Pharm.) admission of 2020-2022 Batch.

Application No.	N001437
Candidate Name:	VAISHNAVI ATUL BHOSALE
Rank:	117
Choice No.	4
Category Allotted:	GENERAL
Course Allotted:	M.S. (Pharm) Pharmaceutics
Institute Allotted:	National Institute of Pharmaceutical Education and Research Hyderabad



Applicable Course Fee: 78625

Undertaking:-

- I undertake that my admission is provisional subject to the submission and verification of valid document mentioned overleaf.
- I declare, that in case I am unable to submit above mentioned certificates/documents for physical verification/validation within the time limit that is notified by the NIPER-JEE 2020, I shall not claim any equity on account of admission against the allotted seat. I also state that I am well aware of the fact that my admission is completely subject to the physical verification/validation of my original certificates otherwise my admission is liable to be cancelled & all the fees deposited by me shall be forfeit.
- I agree, that if any falsified records are detected at any stage of admission or during the course of study & even after I pass out my course, my admission to the course shall be liable to be cancelled or the degree awarded by the NIPER shall be taken back, further, I will be debarred from attending any course at NIPER for the next 05 (Five) years and in addition a criminal case under relevant section(s) of law in force may be initiated against me.
- I undertake that I shall abide by the Rules & Regulations of the NIPER. I also hereby undertake that I shall accept the decision of the NIPER-JEE Committee-2020 as final if the seat allotted to me is taken back or if my admission is cancelled due to submission of incorrect certificates/non-submission of certificates within the duration of time allotted as above, to furnish the same.
- I further declare that I have submitted the result of qualifying degree exam / will submit the result of qualifying degree/certificate as stated above, before the commencement of Final Semester examination at respective NIPER, otherwise my provisional admission shall be cancelled and full fees deposited by me shall be forfeited and no claim will be made by me.
- I have a knowledge that as per the norms of NIPER a fellowship is given to all successful candidates who have granted admission in M.S. (Pharm.)/M.Pharm./ M.Tech. (Pharm.) programme through NIPER JEE 2020 counselling. I understand if till date I do not submit my result of qualifying examination and other required documents mentioned overleaf as per the NIPER JEE 2020 norms. I would not be eligible for fellowship and further till that date I will not claim any fellowship from the NIPER.

(Signature of Student)

Kindly note - Admission is provisional till the submission of following documents at the time of reporting at the allotted NIPER.

- The candidates will be required to submit the following documents in original and one set of self attested photocopies of these certificates **at the time of reporting at the allotted NIPER (if any), failing which, the candidature shall be summarily rejected:**

S.No	Please present following documents at the time of admission reporting at the allotted NIPER
1.	Admit card of NIPER JEE 2020.
2.	Birth Certificate/ Matriculation Certificate as a proof of age and correct name.
3.	Original Migration Certificate (Last Attended University/ Institute)
4.	Mark sheets of all the semesters/years of the qualifying degree.
5.	GPAT/GATE/NET score card, wherever applicable.
6.	Attested copy of Aadhar Card.
7.	Medical Certificate to be provided in the form given at Annexure-1.
8.	Economically Weaker Sections (EWSs) Certificate as per government norms in prescribed format, if applicable.
9.	Sponsorship certificate from the employer in case of Government/Industry sponsored candidates as per form attached at Annexure-2. if applicable.
10.	Affidavit to be provided in the form of Undertaking provided at Annexure-3.
11.	Undertaking to be given by the parents regarding ragging for their wards to abide by rules of the Institute to be given in the form given at Annexure-4.
12.	Affidavit to be provided in the form of Undertaking in prescribed format at Annexure-8.
13.	Certificate of reservation, if applicable.
14.	Certificate of reservation and certificate of income (showing non-creamy layer status of the OBC candidates as provided in OM No. 36033/3/2004-Estt. (Res) dated 9th March, 2004 of the Department of Personnel and Training, Ministry of Personnel, Public Grievances and Pension or any subsequent order issued by the Government of India in this regard). If applicable.
15.	Certificate of disability, if applicable.
16.	Documentary proof in support of the NRI status. If applicable.
	Please refer annexure format available in information brochure.

Chairman

NIPER JEE 2020

Note: Kindly contact respective NIPER authority for reporting.

This is a computer generated document, does not require signature.

S. No. 33/1,
Opp. Chhatrapati Shivaji Sports Complex, Balewadi,
Pune 411045 India
Ph.: 66289600 Fax No.: 020-66289601
Web:

		Receipt No.	MH/REC/21/000573
		Date :	20/01/21
RECEIVED WITH THANKS FROM			Rs.
Mukti Ravindra Dakhore Civil line, Anjangaon Surji, Dist-Amravati Amravati			212,500.00
THE SUM OF	**** TWO LAKH TWELVE THOUSAND FIVE HUNDRED RUPEES AND ZERO PAISA ONLY		
ON ACCOUNT OF	1st Year Tuition fees for PGDM PHM 20-21		
BY	NUMBER	DATE	
NEFT	SBINR520210115066845	15/01/21	
DRAWN ON			
For MITCON Institute of Management			
Authorised Signatory			
Payment by Cheque/ DD is acknowledge subject to realisation & fees once paid will not be refunded. This is System generated receipt no signature required.			



MPH 2020_20_...



INDIAN
INSTITUTE OF
PUBLIC HEALTH
GANDHINAGAR

[A University established under IIPHG Act, 2015 of Gujarat State]

IIPHG/OW/2020-21/REG/MPH/01/28
23rd, June 2020

To,
Ms. Madhuri Gupta
Vishal Bungalow, Manisha Housing Society, Morewasti Chikhali, Chinchawad, Pune, India - 41121
Applicant No: MPH/2020/050

Sub: Offer for admission to two-year Master of Public Health (MPH) Programme for the academic year 2020-22.

Dear Ms. Madhuri Gupta,

Congratulations from Indian Institute of Public Health Gandhinagar (IIPHG)!

We are in receipt of your confirmation to our offer of provisional admission to MPH (2020-22) at our institute. The admission will be governed by the rules and regulations of the university, currently in force and as amended from time to time. As a next course of action, you are requested to a) pay the first installment of tuition fees hostel fees, in case you are opting for the same. Details of hostel accommodation can be found as annexure 1. Please find below the schedule for payment of various fees. You are requested to abide by the timeline.

Payment schedule	Fee for the period	Tuition Fees	Hostel Fees*	To pay by date #
Advance fee	Aug-20 to Nov-20	20,000	7,600	19-06-2020
1 st installment		53,333	20,000	31-07-2020
2 nd installment	Dec-20 to Mar-21	73,334	9,200	31-12-2020
3 rd installment	Apr-21 to July-21	73,333	27,600	30-04-2021
4 th installment	Aug-21 to Nov-21	73,333	18,400	31-07-2021
5 th installment	Dec-21 to Mar-22	73,333	-	31-12-2021
6 th installment	Apr-22 to July-22	73,334	-	30-04-2022
Total		Rs. 4,40,000	Rs. 82,800	

* Hostel fees may be revised in future. This includes charges for stay only, and does not include expenses of food etc.
Any delay beyond the scheduled date will attract penalty of Rs. 100/- Per day (late fees) as per the existing regulations.

The options for payments are a) Online payment, b) Direct deposit to the IIPHG account and c) Payment through cheque/DD in favour of "Indian Institute of Public Health Gandhinagar", submitted to IIPHG Accounts Dept. in person. We do not accept cheque/DD by post. Following are our bank details for online transfer or direct deposits.

A/C Holder Name	: Indian Institute of Public Health Gandhinagar
Bank Name	: HDFC, Bank Ltd.
Branch Name	: Infocity, Gandhinagar
A/C No.	: 50100157403005
IFSC Code	: HDFC0002497
BIC/Swift Code	: HDFCINBBXXX

Kindly make sure that the payment details including scanned copy of receipt/ bank transaction are sent to us immediately on mph_admission@iiphg.org & hshah@iiphg.org.

If you need any further information/guidance, please feel free to contact Dr. Vijay V. Panchdhane, Assistant Registrar, IIPHG on 9428826577/ 079-66740700 or write to with him on vpanchdhane@iiphg.org.

The final decision regarding admissions rests with IIPHG authorities.

We are waiting for official guidance from UGC and other authorities regarding On campus commencement of Academic session for 2020-22, University will inform you regarding the same soon. Course will commence not before 15th August 2020. We may start online orientation & introductory classes.

With best wishes and warm regards,

Thanks,

Dr. Vijay V Panchdhane
Acting registrar



INDIAN INSTITUTE OF PUBLIC HEALTH - GANDHINAGAR

Opp. Air Force Head Quarters, Nr. Lekawada Bus Stop, Lekawada, CRPF P.O., Gandhinagar - 382042 India.

Tel.: +91-6674 0700, Email: contact@iiphg.org





Congratulations - Sri Balaji
University, Pune (SBUP)



Sri Balaji University (SBUP) A... 16 Jul
to KADUSALONI5498@GMAIL.COM ✓



SBUP / Admission / BIMM / 2020-22

16th July, 2020

To,

SALONI KADU

'B/9 NIRANJAN COMPLEX PUNE PUNE
MAHARASHTRA 411045

**ADMISSION TO THE TWO YEAR FULL TIME
AICTE APPROVED**

**MASTER OF BUSINESS ADMINISTRATION (MBA)
OFFERED BY**

**BALAJI INSTITUTE OF MODERN MANAGEMENT
(BIMM):**

FOR THE BATCH 2020-2022

Dear SALONI KADU, (Reg. No. 31-1561),

1. Greetings to you and to your family..



**Institute of Chemical
Technology**
Institute Of Chemical Technology
N.M.Parekh Marg, Matunga, Mumbai 400019
India.
Ph: +91-22-33611111/2222, Fax: +91-22-
33611020, www.ictmumbai.edu.in



**Institute of Chemical
Technology** (18)
Institute Of Chemical Technology
N.M.Parekh Marg, Matunga, Mumbai 400019
India.
Ph: +91-22-33611111/2222, Fax: +91-22-
33611020, www.ictmumbai.edu.in



Fee Receipt(Office Copy - Original)

Receipt No. : IN/2020-2021/384 Receipt Date : 20/11/2020
Student Name : Vishal Ashokrao Kalaskar Enrollment No. : 20PHT219
Class : M.Tech - Pharmaceutical Technology SEM I Div-1 [Reserved] [Open] Father Name : Ashokrao

S No.	Particulars	Total (in Rs.)
1	Library Deposit	2,000.00
2	Tuition Fees	15,000.00
3	Development Fees	18,375.00
	Total Amount	35,375.00

Amt. in words(Rs.): Thirty Five Thousand Three Hundred Seventy Five Only

Paid by: NEFT Rs. 35,375.00 SBIN120325091164 Bank Name:
STATE BANK OF INDIA Date: 20/11/2020

Signature

(Accounted by : Sachin Kadam Ar And Fa)



Fee Receipt(Student Copy - Original)

Receipt No. : IN/2020-2021/384 Receipt Date : 20/11/2020
Student Name : Vishal Ashokrao Kalaskar Enrollment No. : 20PHT219
Class : M.Tech - Pharmaceutical Technology SEM I Div-1 [Reserved] [Open] Father Name : Ashokrao

S No.	Particulars	Total (in Rs.)
1	Library Deposit	2,000.00
2	Tuition Fees	15,000.00
3	Development Fees	18,375.00
	Total Amount	35,375.00

Amt. in words(Rs.): Thirty Five Thousand Three Hundred Seventy Five Only

Paid by: NEFT Rs. 35,375.00 SBIN120325091164 Bank Name:
STATE BANK OF INDIA Date: 20/11/2020

Signature

(Accounted by : Sachin Kadam Ar And Fa)





STATE BANK OF INDIA
RECRUITMENT OF JUNIOR ASSOCIATES (CUSTOMER SUPPORT & SALES) ADVERTISEMENT NO. 300147.
CRPD/CR/2021-22/09

Registration Number : 1991356922
Full Name : Priyanka Yeshwant Kashide
Do you want to apply under: : **Regular Vacancies & Backlog Vacancies**
Circle : MAHARASHTRA/ MUMBAI METRO
Circle Preference 1 (for allotment, if selected) : Maharashtra
Circle Preference 2 (for allotment, if selected) : Mumbai Metro
State you want to apply for : MAHARASHTRA
Official Language : Marathi
Do you have 10th or 12th standard mark sheet/certificate evidencing having studied official local language ? : YES
Category : SC
Sub Caste : Baudhist
I confirm that I am in possession / will produce EWS certificate issued based on annual income for Financial Year 2020-21 : -
Are you a person with benchmark disability of 40% and above ? : NO
Type of Disability : -
Sub-Type of Disability for 'd' & 'e' : -
Sub-Type of Disability : -
Sub-Type of Multiple Disability : -
Are you suffering from cerebral palsy and your writing speed is affected ? : -
If Yes, Do you need compensatory time at the time of examination? : -
Whether your dominant (Writing) hand is affected ? : -
If Yes, Do you need compensatory time at the time of examination? : -
Do you intend to use the services of a scribe ? : -
I accept the Guidelines for Scribe : -
Religion to which you belong : Buddhist
Do you belong to Religious Minority Community ? : NO



Nationality / Citizenship : Indian

Are you seeking relaxation under widow /divorced women / women judicially Separated from their husbands and who are not re-married ? : NO

Are you an Ex-Serviceman ? : NO

Are you a Disabled Ex-Serviceman (DISXS) ? : NO

Period of Service (in months) : -

Are you a Dependent of Serviceman killed in Action (DXS) ? : NO

Are you a Matriculate Ex-serviceman, who have obtained the Indian Army Special Certificate of Education or corresponding certificate in the Navy or Air Force, after having completed not less than 15 years of service in Armed Forces of the Union (Such certificates should be dated on or before 16.08.2021) ? : -

Are you already working in SBI in the clerical or officer cadre ? : NO

Have you earlier employed in State Bank of India and resigned from the Bank while in clerical or officer cadre ? : NO

Do you have record of default in repayment of loans/credit card dues and/or against whose name adverse report of CIBIL or other external agencies ? : NO

Is/are there adverse report regarding character & antecedents, moral turpitude ? : NO

State/UT to which the Preliminary Examination Centre Belong : Maharashtra

State code : 29

Centre of Preliminary Examination : Pune

State/UT to which the Main Examination Centre Belong : Maharashtra

State code : 29

Centre of Main Examination : Pune

I intend to bring the following ID when appearing for the examination (**I confirm my name on this ID and this application exactly match**) : YES

ID Proof : Aadhar Card

ID Proof No. : 487367461747

Personal Details

Date of Birth : 03-11-1996

Age completed as on 01.04.2021 : 24

Gender : FEMALE

Do you have twin brother / sister ? : NO

Gender of the twin : -

Name of the twin : -

Marital Status : Unmarried

Father's First Name : Yeshwant

Father's Middle Name : Sudamrao

Father's Last Name : Kashide

Mother's First Name : Sangita

Mother's Middle Name : Yeshwant

Mother's Last Name : Kashide

Spouse's First Name : -

Spouse's Middle Name : -
Spouse's Last Name : -
Address for Correspondence
Address 1 : Bhalchandra Row House 14
Address 2 : Shri Gajanan Park
Address 3 : Sinnar phata Nasikroad
District : Nasik
State : MAHARASHTRA
Pincode : 422101

Permanent address

Address 1 : Bhalchandra Row House 14
Address 2 : Shri Gajanan Park
Address 3 : Sinnar phata Nasikroad
District : Nasik
State : MAHARASHTRA
Pincode : 422101

Contact Details

Mobile No : +91 7972247026
Alternative Number (Mobile No/Landline No) : +91 8411929018
Email ID : kashidepriyanka30@gmail.com

Educational Qualification (as on 16.08.2021)

Exam Passed	Degree/Subject/Stream	Name of College /University	Date of Passing	% of Marks	Class / Grade
Graduation 1/Equivalent Passed	Science	Dr DY Patil College of Pharmacy Akurdi Pune	10-11-2020	56.00	Second Class
Professional Qualification	BPharmacy	Dr DY Patil College of Pharmacy Akurdi Pune	10-11-2020	56.00	Second Class

Other Details :

Whether desirous of taking Pre-Exam Training(SC/ST/EXS/DISXS/DXS/Religious Minority): : YES
State/UT : Maharashtra
State code : 29
Centre of Pre-Examination Training (If conducted through classroom mode) : Pune

Languages Known	Read	Write	Speak
Marathi	YES	YES	YES

Hindi	YES	YES	YES
English	YES	YES	YES

Uploaded Document Details :

1. Thumb impression

2. Handwritten Declaration

Declaration:

I hereby declare that all the statements made in this application are True, Complete and Correct to the best of my knowledge and belief. I understand that in the event of any information being found untrue or incorrect at any stage or I am not satisfying any of the eligibility criteria stipulated, and also in case of creating influence/undue pressure regarding recruitment shall tantamount to cancellation of my candidature.

I confirm that my name as filled by me in the application form exactly matches with the name in my ID proof

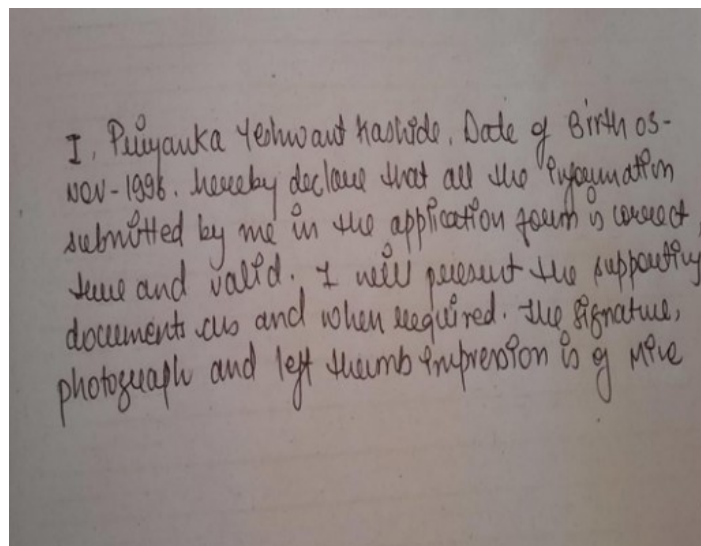


Date: 16-05-2021

Signature of Applicant



Thumb impression



I, Poojanka Yeshwant Kashide, Date of Birth 05-11-1996, hereby declare that all the information submitted by me in the application form is correct, true and valid. I will present the supporting documents as and when required. The signature, photograph and left thumb impression is of mine.

Handwritten Declaration



National Institute Pharmaceutical Education and Research (NIPER)


Guwahati, Hyderabad, S.A.S. Nagar

NIPER Joint Entrance Examination 2020 – M.Tech in Medical Devices

Provisional Seat Allotment Letter

Dear Candidate,

Congratulations! This is to inform that you have been allotted seat in M. Tech in Medical Devices program as per your AI Rank obtained in NIPER JEE-2020 for M.Tech.(Medical Devices) admission of 2020-2022 Batch.

Application No.	11810000322	
Hall Ticket No.	200202056	
Candidate Name	KHOPTIKAR PADMANABH PRADYUMNA	
Rank	4	
Category Allotted	GENERAL	
Course Allotted	M.Tech	
Institute Allotted	NIPER Hyderabad	
Applicable Fee	79,625	
(The fee is to be deposited in the Accounts of the Allotted NIPERs as given in Page 3)		

Undertaking:-

- I undertake that my admission is provisional subject to the submission and verification of valid document mentioned overleaf.
- I declare, that in case I am unable to submit the above mentioned certificates/documents for physical verification/validation within the time limit that is notified by the NIPER-JEE 2020, I shall not claim any equity on account of admission against the allotted seat. I also state that I am well aware of the fact that my admission is completely subject to the physical verification/validation of my original certificates otherwise my admission is liable to be cancelled & all the fees deposited by me shall be forfeit.
- I agree, that if any falsified records are detected at any stage of admission or during the course of study & even after I pass out my course, my admission to the course shall be liable to be cancelled or the degree awarded by the NIPER shall be taken back, further, I will be debarred from attending any course at NIPER for the next 05 (Five) years and in addition a criminal case under relevant section(s) of law in force may be initiated against me.
- I undertake that I shall abide by the Rules & Regulations of the NIPER. I also hereby undertake that I shall accept the decision of the NIPER- JEE Committee-2020 as final if the seat allotted to me is taken back or if my admission is cancelled due to submission of incorrect certificates/non –submission of certificates within the duration of time allotted as above, to furnish the same.
- I further declare that I have submitted the result of qualifying degree exam / will submit the result of qualifying degree/certificate as stated above, before the commencement of Final Semester examination at respective NIPER, otherwise my provisional admission shall be cancelled and full fees deposited by me shall be forfeited and no claim will be made by me.
- I have a knowledge that as per the norms of NIPER a fellowship is given to all successful candidates who are granted admission in M.Tech. (Pharm.) programme through NIPER JEE 2020 counseling. I understand if till the date I do not submit my result of qualifying examination and other required documents mentioned overleaf as per the NIPER JEE 2020 norms. I would not be eligible for fellowship and further till that date I will not claim any fellowship from the NIPER.

(Signature of student)

Kindly note - Admission is provisional till the submission of following documents at the time of reporting at the allotted NIPER.

The candidates will be required to submit the following documents in original and one set of self-attested photocopies of these certificates **at the time of reporting at the allotted NIPER, failing which, the candidature shall be summarily rejected:**

S. No	Please present following documents at the time of admission reporting at the allotted NIPER
1.	Admit card of NIPER JEE 2020.
2.	Birth Certificate/ Matriculation Certificate as a proof of age and correct name.
3.	Original Migration Certificate (Last Attended University/ Institute)
4.	Mark sheets of all the semesters/years of the qualifying degree.
5.	GPAT/GATE/NET score card, wherever applicable.
6.	Attested copy of Aadhar Card.
7.	Medical Certificate to be provided in the form given at Annexure-1.
8.	Economically Weaker Sections (EWSs) Certificate as per government norms in prescribed format, if applicable.
9.	Sponsorship certificate from the employer in case of Government/Industry sponsored candidates as per form attached at Annexure-2. if applicable.
10.	Affidavit to be provided in the form of Undertaking provided given in Annexure-3.
11.	Undertaking to be given by the parents regarding ragging for their wards to abide by rules of the Institute to be given in the form given in Annexure-4.
12.	Affidavit to be provided in the form of Undertaking in prescribed format given in Annexure-8.
13.	Certificate of reservation, if applicable.
14.	Certificate of reservation and certificate of income (showing non-creamy layer status of the OBC candidates as provided in OM No. 36033/3/2004-Estt. (Res) dated 9th March, 2004 of the Department of Personnel and Training, Ministry of Personnel, Public Grievances and Pension or any subsequent order issued by the Government of India in this regard). If applicable.
15.	Certificate of disability, if applicable.
16.	Documentary proof in support of the NRI status. If applicable.
	Please refer annexure format available in information brochure.

Chairman

NIPER JEE 2020

Note: Kindly contact respective NIPER authority for reporting.

This is a computer-generated document, does not require signature.

Account Details for Admission Fee Deposition

NIPER Guwahati

Bank Name	State Bank of India
Branch	Changsari
Name of A/c. Holder	Director NIPER
S.B. A/c No.	30462731599
IFSC Code	SBIN0016944
MICR Code	781002537
Type of Account	Savings Bank
Brach Code	016944

NIPER Hyderabad

Bank Name	State Bank of India
Branch	IDPL COLONY BRANCH
Name of A/c. Holder	NIPERH RESOURCES
S.B. A/c No.	37787539689
IFSC Code	SBIN0020245
MICR Code	500002326
BANK Swift Code	SBININBBH08
Type of Account	SAVINGS ACCOUNT
Brach Code	20245
BANK Ph. No.	040-23178486
BANK CODE	003
BSR No.	0020245
ADDRESS OF THE BANK	KUKATPALLY, HYDERABAD-500037

NIPER S.A.S. Nagar

Bank Name	State Bank of India
Branch	Mohali sector
S.B. A/c No.	65129619046
IFSC Code	SBIN0051018
BANK CODE	051018
ADDRESS OF THE BANK	NIPER sector 67 Mohali Dist. SAS Nagar Punjab

Test Report Form

ACADEMIC

NOTE Admission to undergraduate and post graduate courses should be based on the ACADEMIC Reading and Writing Modules.
GENERAL TRAINING Reading and Writing Modules are not designed to test the full range of language skills required for academic purposes.
It is recommended that the candidate's language ability as indicated in this Test Report Form be re-assessed after two years from the date of the test.

Centre Number

IN001

Date

11/JAN/2020

Candidate Number

319255

Candidate Details

Family Name

KOLI

First Name

CHAITRALI ANNARAO

Candidate ID

T6307114



Date of Birth

24/01/1999

Sex (M/F)

F

Scheme Code

Private Candidate

Country or Region of Origin

Country of Nationality

INDIA

First Language

MARATHI

Test Results

Listening

8.5

Reading

7.5

Writing

7.0

Speaking

7.5

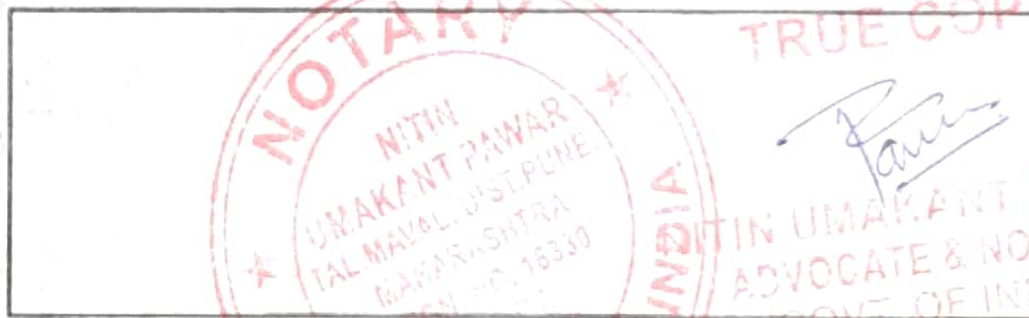
Overall Band Score

7.5

CEFR Level

C1

Administrator Comments



Administrator's Signature

Date

24/01/2020

Centre stamp



Validation stamp



Signature

Test Report Form Number

19IN319255KOLC001A

Chaitrali K.



**SINHGAD TECHNICAL EDUCATION SOCIETY'S****Smt. Kashibai Navale college of Pharmacy**

S No 40/4A+4B, Kondhwa Bk, Pune

Phone No : 2029631322 Email : steskaccounts@sinhgad.edu

FEE RECEIPT

Receipt No	: KKNPM2021/00260	Date	: 29-01-2021
Received From	: Momin Shahanur Manshur	Student-ID	: 2021/KKNP/00999
Mother Name	: Shabana	Course	: M.PHARM
Division	: MPHARM-I-A	Class	: MPHARM-I
Branch	: PHARMACEUTICS		

Description	Amount ₹
SPPU Pro-Rata Fee/2021	592
Eligibility & Form Fee/2021	550
SPPU Medical Fee/2021	60
SPPU Student Activity Fee/2021	1000
Student Insurance/2021	25
Caution Money Deposit/2021	5000
Development Fee/2021	17833
Tution Fee/2021	74940
-	
-	
-	
TOTAL	₹ 100000

Mode Of Payment : Cash

Amount in Words : ₹ one lakh Only.

Instrument No :

Date : 29-01-2021

* This is a computer generated fee receipt hence no signature is required

DPU

Dr. D. Y. Patil Unitech Society's Dr. D. Y. PATIL INSTITUTE OF PHARMACEUTICAL SCIENCES AND RESEARCH

Pimpri, Pune - 411 018. Ph. : +91 20 27420261
E-mail : info.pharmacy@dypvp.edu.in, Website : pharmacy.dypvp.edu.in

RECEIPT (M.PHARM)

Date : 12/01/2020

Receipt No. : 010

Ref No. :

Name of the Student in full : Pazalke Pranjali Sanjay
Address for Correspondence : Kharwandi road, Sonai, Tal- Newasa,
Dist- Ahmednagar. Phone No. / Mobile No. : Student - 7028693416
Parent - 9860623416
Class : F.Y. (cuties) Branch : M. Pharm Year : 2020-21

Sr. No.	Particulars	Amount ₹	Ps.
1	Tuition Fee	—	
2	Development Fees	14955	
3	Advance Fees	—	
4			
Amount in Words ₹ <u>Fourteen thousand Nine hundred Fifty five only</u>		TOTAL	14955

Mode of Payment Cash / D.D. / P.O. No. NEFT Dated —

Drawn on Bank — Branch —

The balance of fees due (₹ : —), if any, will be paid on or before —

CONDITIONS

1. The admission is purely provisional and is subject to approval by Director of Technical Education, M.S. Mumbai.
2. The payment of fees does not give right to admission.
3. Any legal dispute between the college & student or his / her parent / guardian, arising out of the relations established by admission, will be dealt with in the court of C.J.J.D., Pimpri, Pune, Maharashtra State.
4. This Original receipt must be produced while claiming the refund in case of cancellation of admission or leaving the college prior to completion of the course.

I have read the conditions of admission rules & regulations given in information brochure of the college and of Govt. of Maharashtra. I agree to abide by them.

Pazalke

Signature of the Student / Parent / Guardian

[Signature]

Receiver's Signature



सत्यमेव जयते



**State Common Entrance Test Cell, Maharashtra State,
Mumbai**
**8th Floor, New Excelsior Building, A.K. Nayak
Marg, Fort, Mumbai-400001. (M.S.)**
**Provisional Allotment for CAP Round - II for Admission to
First Year Of Two Year Full Time Post-Graduate Course In
Pharmacy (M. Pharmacy / Pharm. D. (Post Baccalaureate))
for the year 2020 - 2021**



Personal Details

Candidate's Full Name	PATHAN ANAM ISMAIL	Application ID	MPH20102732
Gender	Female	DOB (DD/MM/YYYY)	18-08-1998
Candidate Category	OPEN	Category for Admission	OPEN
Candidature Type	Maharashtra State Candidate - Type A	Person with Disability	N.A.
Religious Minority	Religious Minority - Muslim	Linguistic Minority	N.A.
EWS Status	N.A.	Orphan Status	NO
Home University	Savitribai Phule Pune University		

Provisional Allotment Details

Institute Allotted	Dr. D.Y. Patil Institute of Pharmaceutical Science & Research, Pimpri, Pune		
Choice Code Allotted	637512610 -Change In Choice Code		
Course Allotted	Quality Assurance Techniques		
Seat Type Allotted	GOPEN		
Preference No. Allotted	2		
CAP Round Allotted	2		
All India Merit No	254		
State General Merit No	244		
Merit Score	163		

IMPORTANT INSTRUCTIONS :

1. Check the allotment made in the CAP Round II through candidate's Login & Verify the correctness of the credentials used in seat allotment made to him/her in CAP round II as per the Rules & Regulations.
2. In later stage, if it is found that the seat allotted to the candidate on the false claims made in the application by the candidate, then such allotment/admission taken in the allotted institute shall be cancelled automatically.
3. The allotment given in CAP Round II is final allotment;
4. Reporting dates for admission in the allotted Institute **27-01-2021 to 29-01-2021 Up to 05.00 p.m.**



Printed On:26-01-2021 09:41:10 AM

Printed By:MPH20102732

URL:<http://cet20.mahacet.org.in/cet2020/mpharm20/index.php/AllotmentController/displayAllotment?id=MTAyNzMy&rnd=Mg==>

Published On: 25-01-2021



Shubangi Jadhav <dypcoptpo@gmail.com>

One year gap after graduation

1 message

Gurunath Pimple <gurunathpimple55@gmail.com>
To: dypcoptpo@gmail.com

Fri, May 21, 2021 at 5:50 PM

Respected mam,

I am Gurunath Digambar Pimple alumini of DYPCOP I have taken a one year gap after graduation due to low GPAT score I didn't get college of my choice in particular department in which i want to peruse my masters. I want admission in Nanded collage of Pharmacy (pharmacology) so i am waiting for next year round of the admission.

regards,

Gurunath Digambar Pimple



SYMBIOSIS INTERNATIONAL (DEEMED UNIVERSITY)

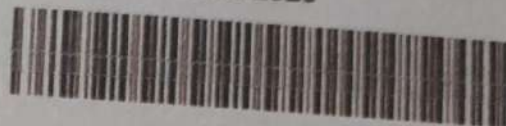
(Established under Section 3 of the UGC Act, 1956)

Re-accredited by NAAC with 'A' grade (3.58/4) | Awarded Category - I by UGC

Founder: Prof. Dr. S. B. Mujumdar, M. Sc., Ph. D. (Awarded Padma Bhushan and Padma Shri by President of India)

PROVISIONAL ADMISSION LETTER

Date: 03.03.2020



SNAP ID : 200130545

Category : OPEN

GE-PIWAT ID : 22AP1212

Institute : SIHS

Programme : MBA - Hospital & Healthcare Management

Dear RANJANE SNEHAL SHIVAJI ,

Congratulations!

We are pleased to inform you that you have been selected for admission to the two year full time MBA - Hospital & Healthcare Management residential programme Batch 2020-2022 at Symbiosis Institute of Health Sciences (SIHS), Symbiosis International (Deemed University) Campus, Hill Base Lavale, Pune 412115.

Please note that this admission is provisional and will be confirmed on payment of fees (As per Annexure I) on or before **16-March-2020 23:59 PM** and subject to fulfilment of eligibility conditions (As per Annexure II) subject to the fulfilment of eligibility conditions (As per Annexure II) and in accordance with the rules of the Symbiosis International (Deemed University).

As a constituent of the prestigious Symbiosis International (Deemed University), we strive to provide you with a learning environment which will help you to always be abreast of changing global practices and give you a head start in your chosen field of work. Your faculty will be drawn from accomplished academicians and practicing professionals with rich and varied experience.

We will provide shared hostel accommodation to students admitted to the programme. Your programme commences on: **16 June 2020** and hostel allotment will be done on **15 June 2020**. Please go through the various details given in the Post Graduate Prospectus and **Symbiosis Institute of Health Sciences** website.

You are advised to bring all relevant self-attested documents as mentioned in Annexure II for submission on the day of commencement of your programme.

We look forward to having you amidst us. Welcome to Symbiosis!

With Best Wishes,

Dr. Rajiv Yeravdekar
Director, Symbiosis Institute of Health Sciences



Shubangi Jadhav <dypcoptpo@gmail.com>

Taking gap for 2021 after completion of b pharm degree .

1 message

kamesh sarpe <kameshsarpe111@gmail.com>
To: dypcoptpo@gmail.com

Fri, May 21, 2021 at 5:51 PM

Currently , due to corona pandemic , I have not taken any post graduation course in this year , in upcoming year I will go for post graduation study (msc or m pharm) - kamesh sarpe

**National Institute of Pharmaceutical Education and Research
Sector-67, S. A. S. Nagar – 160 062, Punjab, India**

**REGISTRATION FORM
Masters (Science) Programme**

Name : Sanjay Subhash Ubale

Registration No. : 20 PEM3220

Discipline : M.S

Department : Pharmaceutics

Semester : Semester 1/3 (July to December)
(Please tick mark appro. Box) Semester 2/4 (January to June)

Year : 2020-2021 1st year.

Semester fee paid : Rs. 60,925 on date: 15-10-2020

Hosteller/Non Hosteller : Hostel no. (if hosteller) _____

Courses to be registered for the coming semester

Course No.	PE-510	PE-520	PE-530	PE-540 PT-580	MC-511	MP-510	BT-510	GE-510	GE-520	GE-522	CG-510
Credit	1	2	1	1	2	1	1	2	1	1	3

Courses of previous semester (s) to be registered in the current semester for which I intend to appear in Semester Examination.

Course No.				
Credit				

Ubale
23-11-2020

Signature of Candidate with Date

Signature of Advisor with Date

Signature of HOD with Date

Course Fee Payment

Receipt *Inbox*



NIPER Ahmedabad *15 Oct*

to me ✓



Dear Applicant,

Course Fee Payment Details -

Registration No :: 100803

Order ID :: 2011206

SBI ePay Reference ID ::
9108287638310

Bank Reference Number ::
202028932559709

Amount :: 60425

Transaction Status :: SUCCESS

Transaction Date / Time :: 2020-10-
15 18:01:13



NIPER Ahmedabad 5 Oct

to me v



Dear Applicant,

Registration for Counseling Payment
Details -

Registration No :: 100803

Order ID :: 2000846

SBI ePay Reference ID ::
3179613091716

Bank Reference Number ::
202027950587843

Amount :: 500

Transaction Status :: SUCCESS

Transaction Date / Time :: 2020-10-
05 17:23:24