



SS INSTITUTE OF PHARMACY

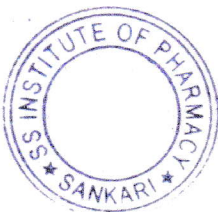
(A unit of VS Educational & Charitable Trust)


Approved by Tamilnadu Government & Pharmacy Council of India, New Delhi.
Affiliated to the Tamilnadu Dr. M.G.R. Medical University,
and The Directorate of Medical Education, Chennai.

LIST OF STUDENTS PROGRESSING TO HIGHER EDUCATION

2023-2024

S.NO	REGISTER NUMBER	NAME	HIGHER EDUCATION
1.	561997216	D.HEMAVATHI	PURSuing M.PHARM
2.	560020523564	V.SATHISHKUMAR	PHARM D AT JKKN COLLEGE OF PHARMACY




PRINCIPAL,
SS INSTITUTE OF PHARMACY,
KUPPANUR (PO), SANKARI (TK),
SALEM - 637301

**APPLICATION FORM FOR M PHARM DEGREE COURSES****M PHARM****UNDER MANAGEMENT QUOTA 2024 - 2025 SESSION****APPLICATION No : 24MPHA210760****AR No : to be assigned by
TNPPCA-HS****Personal Information**

Name	HEMAVATHI D
Gender	FEMALE
Date of Birth	05/07/2001
Email Address	mdhemavathi2001@gmail.com
Mobile	9361900785
Nativity	TAMIL NADU
Nationality	INDIAN
Religion	HINDUISM
Mother Tongue	TAMIL
Community	MBC/DNC
Sub Caste	VANNIAKULA KSHATRIYA (INCLUDING VANNIYAR, VANNIYA, VANNIA GOUNDER, GOUNDER OR KANDER, PADAYACHI, PALLI AND AGNIKULA KSHATRIYA) - 26
Communication Address	317, PERUMAL KOVIL STREET, MELACHERI (VILLAGE & PO), CHETPET (TK)

**B.Pharm Information**

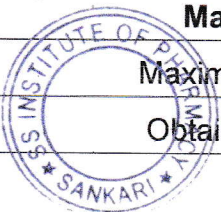
Studied in	TAMIL NADU
Name of the College	SS INSTITUTE OF PHARMACY
Name of the University	THE TN DR.M.G.R. MEDICAL UNIVERSITY, CHENNAI
Joined Month & Year	OCT-2019
Passed Month & Year	SEP-2023
Final Year Univ. Exam. Reg .No	561997216
Pharmacy Council Reg. No	43596 a1

B.Pharm Academic Marks

(For all subjects put together)

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Marks	I-Year	II-Year	III-Year	IV-Year	Grand Total
Maximum	1400	1300	1400	1150	5250
Obtained	1168.00	1004.00	1160.00	938.00	4270
				Percentage (%)	81

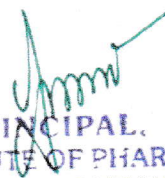
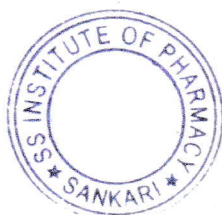
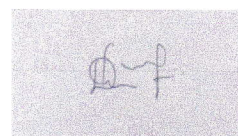


Payment Information

Mode of Payment	Unified Payments	Bank / Card	UPI
Bank Reference No.	462867312984	Order Tracking No.	113466953473
Amount	1500.00	Payment Status	Success

I hereby declare that all the particulars stated in this application form are true to the best of my knowledge and belief. I have read the information brochure and I shall abide by the terms and conditions there in. In the event of suppression or distortion of any fact like educational qualification, community etc., made in my application form may result in punitive action in addition to the summary cancellation of my candidature for the admission.

HEMAVATHI D



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SALEM - 637301



JKKN College of Pharmacy

JKKN College of Pharmacy

Natarajapuram NH - 47 (Salem to Coimbatore)

9th Sep 2024

SATHISHKUMAR V

ODAIKARAI STREET ADIANNAMALAI PO THIRUVANNAMALAI
6384216513

Sub : Admissions Offer

Dear SATHISHKUMAR V

We are pleased to make an offer of admission for Doctor of Pharmacy at
JKKN College of Pharmacy for the year 2024 Congratulations and we hope
you will accept the offer.

You can reach the admissions office for more information if you may need.


We wish you all the best. We look forward to seeing you

JKKN College of Pharmacy

Office of Admissions

JKKN College of Pharmacy




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