

Jagannath University Faculty of Life and Earth Sciences

Master of Pharmacy (Professional) Program Department of Pharmacy

Application Form (01P)

Spring 2022 (February-July)

Attach						
photograph						
30 mm X 40 mm						

Choice of major:	Industrial Pharmacy (To be filled by the office				the office)
(Put number 1 and/or 2 according to your choice)	Pharmaceutical Marketing		Roll: 01P-		
Name of Applicant:		'			
2. Father's Name:					
3. Mother's Name:					
4. National ID No.:	5. Date of Birth:				
6. Present Address:	3. Duce of Birth.				
7. Permanent Address:					
8. Mobile Number:	9. F-	·mail address:			
10. Academic records:		man address.			
Degree	Name of the Institution	Exam year	Subject	cGPA,	/Division
11. Current Status:	Student	☐ Self-Er	nployed	□Othe	ers
Applicant's Signature:	Date:		Signature of	of the C	Convener
, ippilounico orginaturo.		arm. (Profession	al) Program Adm		
	Jacoppoth University				
	Jagannath University Faculty of Life and Earth Science	ences			
	of Pharmacy (Professiona	al) Program		Atta photo	
Sovering Sandarding	Department of Pharma	су		30 mm X	
	Application Form (01P	=			
	Spring 2022 (February-Jul	ly)			
Choice of major:	Industrial Pharmacy	(To be	filled by	the office)	
(Put number 1 and/or 2 according to your choice)	Pharmaceutical Marketing		Roll: 01P-		
1. Name of Applicant:					
2. Father's Name:					
3. Mother's Name:					
4. National ID No.:	5. Date of Birth:				
Applicant's Signature:	Date:		Signature of	of the C	Convener