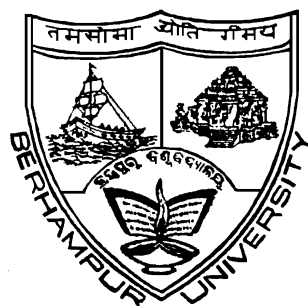


# PROSPECTUS & APPLICATION FORM FOR M.PHARM COURSE, 2011-2012



**BERHAMPUR UNIVERSITY**  
BHANJA BIHAR, BERHAMPUR - 760 007, ORISSA

**BERHAMPUR UNIVERSITY  
PROSPECTUS  
FOR ADMISSION TO M.PHARM COURSE**

**ACADEMIC SESSION – 2011-2012**

## 1. SCHEDULE

- (a) Date of Notification: **7<sup>th</sup> September 2011**
- (b) Date of submission of Documents along with fill in application forms  
And Admission: **12<sup>th</sup> to 15<sup>th</sup> September 2011**

## 2. COURSES OFFERED

The course duration and number of seats available are noted against each course.

Courses	Duration	No. of seats	Offered by the Department of
M. Pharm.	4 Semesters (2 years)	60	Pharmacy
		1. Pharmaceutical Technology: 20	
		2. Pharmaceutical Analysis & Quality Assurance: 20	
		3. Pharmaceutics: 20	

## 3. ELIGIBILITY FOR ADMISSION

### (a) M. Pharm.

Any person with a B. Pharm. Degree from an Institution duly recognised by the competent authority with at least 50% of marks in the aggregate or equivalent grade point

### TABLE SHOWING ELIGIBILITY FOR ADMISSION

Sl. No.	Course	Qualifying Examination	Subjects in the Qualifying Examination(s)	Remarks
1	M. Pharm.	B. Pharm		

## 4. RESERVATIONS

**Reservations for the Scheduled Castes & Scheduled Tribes:** 22.5 % of the seats in different courses are reserved i.e. for candidates belonging to the Scheduled Tribes (13%) and the Scheduled Castes (9.5%).

For consideration under the Reserved Categories necessary certificate to this effect issued only by a **Revenue Officer of the locality not below the rank of a Tahasildar must be submitted.**

**5. The following fee are to be paid at the time of admission.**

Sl.No.	Course	Fee
1.	Tuition fee per semester	Rs.35,000.00
2.	Form Fee	Rs.400.00
3.	University Registration Fee	Rs 100. 00
4.	University Recognition Fee	Rs 100. 00
5.	Calendar	Rs 50. 00
6.	Magazine	Rs 50. 00
7.	Identity Card	Rs 50. 00
8.	Abstract of Attendance	Rs 10. 00
9.	Medical Aid	Rs 100. 00
10.	Library Fee	Rs 200. 00
11.	Transport Fee	Rs. 2,400.00

**Fee once collected at the time of admission shall not be refunded under any circumstance.**

**(C) Department Seminar Fee:** The students shall have to pay seminar fee and any other fee to the course Coordinator as decided by the concerned Course Coordinator.

**6. HOSTEL FACILITIES:**

Hostel facilities will be provided to the students of self-financing courses, subject to availability of seats, in the P.G. Hostels for Boys and Girls on the basis of **first-come, first-served** basis. In the event of allotment of hostel seats the students shall have to abide by the Rules and Regulations of the Hostel and pay the requisite fees at par with the regular students.

**7. COMMENCEMENT OF CLASSES**

Classes of the different courses will commence on the date and time to be notified by the Course Coordinators.

**8.** The University reserves the right to conduct or cancel any course, if adequate number of students do not register due to some reason or other.

**9.** Steps will be taken to assist the students for placement.

**10. DISPUTES**

All disputes concerning admission and studentship are subject to the exclusive jurisdiction of the Civil Courts and legal fora at Berhampur (Ganjam). All admissions are provisional and can be cancelled at any time for any valid reason such as misconduct, forgery, etc.

**11. RAGGING**

**Ragging in any form is strictly prohibited. Severe action shall be taken as per rules against those involved in ragging. As per the U.G.C guide line 6.1 (d & e) of the regulation (F-1-16/2007 (CPP –II/dated 17June 2009), it is mandatory for all the applicants to submit an affidavit in a non-judicial stamp paper as per the prescribed proforma enclosed in the prospectus, if admitted.**

**CHAIRMAN, P.G. COUNCIL  
Berhampur University**

**DECLARATION****(To be submitted along with the application form)**

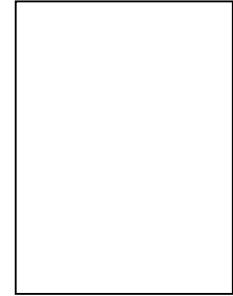
1. I Mr/Ms. .... do hereby declare that I am aware of the provision that students admitted to the M.Pharm. course are not permitted to take concurrent admission in any other course(s) or appear at any other examination so long as they continue their studies in the concerned courses, and until they have fully appeared at the said examinations.
2. I do hereby declare that I have not been admitted to any other course(s) nor shall I appear at any other examination as long as I continue my studies in the course, if admitted.
3. If at any time it is found that I have violated the above conditions, I shall be liable to forfeit my seat, cancellation of my admission and such other penal action as may be considered appropriate by the University. I shall not claim the refund of the course fee and other fee deposited at the time of admission.
4. I shall abide by the rules and regulations of self-financing courses of Berhampur University

Date:

**Full Signature of the Applicant**

**APPLICATION FORM FOR ADMISSION INTO  
M.PHARM COURSE  
BERHAMPUR UNIVERSITY**

**ACADEMIC SESSION – 2011-12**



1. Name of the Applicant (Surname first)  
(In **BLOCK LETTERS**) \_\_\_\_\_
2. (a) Sex : Male / Female  
(b) Nationality : \_\_\_\_\_
3. Date of Birth : Day                      Month                      Year
4. Father's / Guardian's Name : \_\_\_\_\_
5. Mother's Name : \_\_\_\_\_
6. (a) Permanent Address (in detail) :   
  
(b) Present address for correspondence  
(in **BLOCK LETTERS** & in detail) :
7. Berhampur University Regd. No  
(For students of Berhampur University): \_\_\_\_\_
8. Mention if admission is claimed from Reserved  
Quota (Please ✓ whichever is applicable and  
Submit attested copy of reserved quota certificate)                      SC/ST
9. (a) Qualifying Degree Examination  
Passed / Appeared : \_\_\_\_\_  
(b) Name of the University/Institution  
from which passed/appeared : \_\_\_\_\_  
  
(c) Bank Draft No. & Date and Amount: \_\_\_\_\_

## 10. EDUCATIONAL QUALIFICATIONS

Name of the Examination	University/ Council/Board	Year	Divn. & Distn.	Marks secured	Maximum marks	Remarks
(a) H.S.C. or equivalent						
(b) Intermediate/+2/Diploma/D.Pharm.						
(c) B.Pharm.						
(d) Any other						

**Note: Candidates are required to submit attested copies of mark sheets (year-wise) Declaration/Undertaking:**

## 11. Choice of Preference of Specialisation: (Make a Tick Mark)

<b>(1) Pharmaceutical Technology</b>	
<b>(2) Pharmaceutical Analysis &amp; Quality Assurances</b>	
<b>(3) Pharmaceutics</b>	

I declare that the particulars furnished in this form are true to the best of my knowledge and belief and as per my certificates and valid official documents. I further declare that in case any of the above information is found to be incorrect at any time, I shall be liable to forfeit my seat and to such penal action as the University may deem appropriate.

I undertake to abide by the rules of the P.G. Council and P.G. Hostels, framed by the Berhampur University and if at any time instance of breach of these rules, indiscipline, disobedience or misconduct or involvement in ragging is found against me, my name shall be struck off from the rolls of the University.

I have understood the various provisions and rules of eligibility and admission to various Self-Financing Courses of P.G. Departments of Berhampur University as mentioned in the Prospectus supplied to me along with the application form and I undertake to abide by any decision taken by the University authorities in regard to my eligibility and admission into P.G. Departments.

Date: .....

**Full Signature of the Applicant**

**Check List of Enclosures:**

**The application should be accompanied by the following documents.**

- Four recent duly attested passport size photographs duly attested by gazetted officer..
- Self attested copies of mark sheets and certificates of HSC, +2, Diploma in Pharmacy, CLC, Conduct Certificate, B.Pharm.
- Declaration as specified in the prospectus.
- Self attested copy of Registration Receipt (for Berhampur University candidates).
- Bank Draft in original for an amount of Rs.38,460.00/- drawn in favour of the Comptroller of Finance, Berhampur University and payable at SBI, Bhanja Bihar, (Code 2107)
- Applicants interested for accommodation in the University Hostels are to submit an application in plain paper to the **Course Coordinator** along with the application.
- Duly filled in prescribed affidavits (Annexure-I and II) in non-judicial stamp paper in original are to be submitted in case you are admitted.

**ANNEXURE – I**

**AFFIDAVIT BY THE STUDENT**

2. I, ..... (*full name of student with admission/registration/enrolment number*) s/o d/o Mr./Mrs./Ms. ...., having been admitted to ..... (*name of the institution*), have received a copy of the UGC Regulations on Curbing the Menace of Ragging in Higher Educational Institutions, 2009, (*hereinafter called the "Regulations"*) carefully read and fully understood the provisions contained in the said Regulations.
3. I have, in particular, perused clause 3 of the Regulations and am aware as to what constitutes ragging.
4. I have also, in particular, perused clause 7 and clause 9.1 of the Regulations and am fully aware of the penal and administrative action that is liable to be taken against me in case I am found guilty of or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging.
5. I hereby solemnly aver and undertake that
  - a) I will not indulge in any behaviour or act that may be constituted as ragging under clause 3 of the Regulations.
  - b) I will not participate in or abet or propagate through any act of commission or omission that may be constituted as ragging under clause 3 of the Regulations.
5. I hereby affirm that, if found guilty of ragging, I am liable for punishment according to clause 9.1 of the Regulations, without prejudice to any other criminal action that may be taken against me under any penal law or any law for the time being in force.
6. I hereby declare that I have not been expelled or debarred from admission in any institution in the country on account of being found guilty of, abetting or being part of a conspiracy to promote, ragging; and further affirm that, in case the declaration is found to be untrue, I am aware that my admission is liable to be cancelled.

Declared this \_\_\_ day of \_\_\_\_\_ month of \_\_\_\_\_ year.

\_\_\_\_\_  
Signature of deponent  
Name:

**VERIFICATION**

Verified that the contents of this affidavit are true to the best of my knowledge and no part of the affidavit is false and nothing has been concealed or misstated therein.

Verified at .....(place) on this the .....(day) of .....(month),..... (year) .

\_\_\_\_\_  
Signature of deponent

Solemnly affirmed and signed in my presence on this the ..... (day) of .....(month), .....(year ) after reading the contents of this affidavit.

OATH COMMISSIONER

ANNEXURE - II

**AFFIDAVIT BY PARENT/GUARDIAN**

2. I, Mr./Mrs./Ms. .... (full name of parent/guardian) father/mother/guardian of..... (full name of student with admission/registration/enrolment number), having been admitted to .....(name of the institution), have received a copy of the UGC Regulations on Curbing the Menace of Ragging in Higher Educational Institutions, 2009, (hereinafter called the "Regulations"), carefully read and fully understood the provisions contained in the said Regulations.
3. I have, in particular, perused clause 3 of the Regulations and am aware as to what constitutes ragging.
4. I have also, in particular, perused clause 7 and clause 9.1 of the Regulations and am fully aware of the penal and administrative action that is liable to be taken against my ward in case he/she is found guilty of or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging.
5. I hereby solemnly aver and undertake that
  - a) My ward will not indulge in any behaviour or act that may be constituted as ragging under clause 3 of the Regulations.
  - b) My ward will not participate in or abet or propagate through any act of commission or omission that may be constituted as ragging under clause 3 of the Regulations.
5. I hereby affirm that, if found guilty of ragging, my ward is liable for punishment according to clause 9.1 of the Regulations, without prejudice to any other criminal action that may be taken against my ward under any penal law or any law for the time being in force.
6. I hereby declare that my ward has not been expelled or debarred from admission in any institution in the country on account of being found guilty of, abetting or being part of a conspiracy to promote, ragging; and further affirm that, in case the declaration is found to be untrue, the admission of my ward is liable to be cancelled.

Declared this \_\_\_ day of \_\_\_\_\_ month of \_\_\_\_\_ year.

\_\_\_\_\_  
 Signature of deponent  
 Name:  
 Address:  
 Telephone/Mobile No.:

**VERIFICATION**

Verified that the contents of this affidavit are true to the best of my knowledge and no part of the affidavit is false and nothing has been concealed or misstated therein.

Verified at .....(place) on this the ....(day) of ....(month) , ..... (year) .

\_\_\_\_\_  
 Signature of deponent

Solemnly affirmed and signed in my presence on this the ..... (day) of .....(month), ..... (year) after reading the contents of this affidavit.

OATH COMMISSIONER