

5.2.2 Average percentage of students progressing to higher education during the last five years

DETAILS OF PROGRESSION TO HIGHER STUDIES

Sr.No	Name of student enrolling into higher education	Program graduated from	Name of institution joined
1	AHER JAYSHRI SUBHASH	B.Pharmacy	Womens College of Pharmacy, Chincholi, Nashik
2	AHER SNEHAL BALASAHEB	B.Pharmacy	Pravara Rural College of Pharmacy, Loni, Loni
3	AHER VAISHNAVI CHANDRAKANT	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
4	AHIRE KOMAL DILIP	B.Pharmacy	MGV College of Pharmacy, Panchavati, Nashik
5	ANDHALE CHAITALI SANJAY	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
6	AROTE TANUJA BARAKU	B.Pharmacy	Vishal Institute of Pharmaceutical Education and Research, Alephata
7	AUTADE SHRADDHA K. MQ	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
8	DIGHE SWAMINIAVINASH	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
9	GAIKWAD ABHIJEET RAMNATH	B.Pharmacy	Sanjivani College of Pharmacy
10	GHORPADE GAURAVI ANIL	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
11	GONDKAR SHRADDHA RAJENDRA M	B.Pharmacy	College of Pharmacy, Viladghat
12	KHANDARE TUSHAR RAJENDRA	B.Pharmacy	RC Patel College of Pharmacy, Shirpur
13	KHULE SHUBHAM JAGANNATH	B.Pharmacy	SND College of Pharmacy, Yeola
14	MEHETRE PRATIKSHA BHAGUJI	B.Pharmacy	College of Pharmacy, Viladghat
15	MHASKE SHUBHAM BALASAHEB	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
16	MORE MAYURI SOMNATH	B.Pharmacy	SNBT College of Pharmacy, Nashik
17	NANNAWARE PREMJI SUDHAKAR	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
18	NIKAM KAVERI VITTHAL	B.Pharmacy	Pravara Rural College of Pharmacy, Loni





19	NIMSE RUSHIKESH BALASAHEB	B.Pharmacy	SND College of Pharmacy, Yeola
20	PATIL VAISHNAVI SHIVAJI	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
21	RUDRAWAR ONKAR PRAKASH	B.Pharmacy	Karnataka College of Pharmacy
22	SASANE SARITA BABASAHEB	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
23	SHELKE AKASH KAILAS	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
24	SHELKE PRANJALI BABAN	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
25	SHINDE SHARDHA BALASAHEB	B.Pharmacy	College of Pharmacy, Viladghat
26	TAMBE NIKITA SAMPAT	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
27	VIKHE NIKITA RAM	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
28	WARKHAD RUSHIKESH SHANKAR	B.Pharmacy	AVCOP, Sangamner
29	SABALE SAGAR KAILAS	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
30	GORE PRATIKSHA SANTOSH	B.Pharmacy	HKE's College of Pharmacy, Gulbarga, Karnataka
31	KASABE AKSHAY SAKHARAM	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
32	NIRMAL TEJAL SUNIL	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
33	ALHAT SONALI DILIP	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
34	BHANGRE SHRADDHA JAYANT	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
35	CHINCHORE GAURAV SHANKAR	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
36	DARADE PRIYANKA SOMNATH	B.Pharmacy	Amrutvahini College Of Pharmacy, Sangamner
37	DEOKAR ANUJA UDDHAV	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
38	DHAVANE SHWETA SHAMRAO	B.Pharmacy	Padmashri Dr. Vithalrao Vikhe Patil College of Pharmacy, Viladghat
39	DIGHE YOGITA PANDURANG	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
40	GAIKWAD NIKITA RAMAKANT	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
41	GAIKWAD SHAMAL SANJAY	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
42	GHOLAP PRIYANKA DILIP	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
43	GHOLAP SHUBHAM VASANT	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
44	GHULE HANUMANT ARJUN	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
45	KADAM VINAYA VAIBHAV	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
46	KARALE GEETANJALI VILAS	B.Pharmacy	Pravara Rural College of Pharmacy, Loni



47	KARWANJE PRATIK MANIKRAO	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
48	KHOSE SHIVPRASAD DINKAR	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
49	LANDGE KUSHAL RAMDAS	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
50	LOLAGE MAYURI VIJAYKUMAR	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
51	MANKAR SHUBHAM POPAT	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
52	MEHTA KAVITA JAGDISHJI	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
53	MHASKE PRATIKSHA BHARAT	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
54	NALAWADE DIPAK DADASAHEB	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
55	PACHORE RUTUJA SANJAY	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
56	PADALKAR NINAD AVINASH	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
57	PAGARE AMRAPALI ANIL	B.Pharmacy	Mahatma Gandhi Vidya Mandir COP Panchavati, Nashik
58	PAWAR AKASH BUDHAJI	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
59	PAWAR PRATIKSHA RAMESH	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
60	POPATIYA AFREEN ASIF	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
61	PULATE HARSHADA KONDIRAM	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
62	SHELKE HARSHALI LAXMAN	B.Pharmacy	Padmashri Dr. Vithalrao Vikhe Patil College of Pharmacy, Viladghat
63	SHAIKH JABBAR DAUD	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
64	SHIRURE DHIRAJ SANJAY	B.Pharmacy	Padmashri Dr. Vithalrao Vikhe Patil College of Pharmacy, Viladghat
65	TAMBE RUPALI BHANUDAS	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
66	TANDLE LAHU DINKAR	B.Pharmacy	SND College Of Pharmacy, Yeole
67	THORAT MOHINI BHAUSAHEB	B.Pharmacy	D.Y.Patil, Akurdi, Pune
68	TODMAL SUHAS ASHOK	B.Pharmacy	D.Y.Patil, Pimpri Chinchawad, Pune
69	VIKHE MEGHA DNYANESHWAR	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
70	WAGH NIKITA RAMRAO	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
71	ANAP VIDYATAI RAVINDRA	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
72	ANDHALE ATUL RAMRAO	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
73	DIGHE PRACHI NAMDEO	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
74	GAWALI VIDYA SHAHAJI	B.Pharmacy	Pravara Rural College of Pharmacy, Loni



75	GODGE SHUBHAM VILAS	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
76	HARDE SHUBHANGI LAXMAN	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
77	ILAG POONAM ASHOK	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
78	JAYBHAY MAHESH	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
79	JOJARE DIPTI CHANDRAKANT	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
80	KALAMKAR CHAITALI S.	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
81	KHEDKAR BHAGYASHRI B.	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
82	MULIK UJJWALA NARAYAN	B.Pharmacy	MIT, Pune
83	PANDURE PRITESH CHANDAN	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
84	POKHARKAR SHRADDHA S.	B.Pharmacy	Allard College, Pune Pharmaceutics
85	PULATE SHUBHANGI P.	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
86	ROKADE SNEHAL D.	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
87	ROKADE VIJAY GANPAT	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
88	SANGALE PANDURANG H.	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
89	SHEJUL MAHESH BABAN	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
90	SHELKE ARCHANA KHANDU	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
91	SHINDE MADHURI SITARAM	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
92	SHINDE SUVARNA BHAGWAT	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
93	TAMBE RUTUJA BHARAT	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
94	TAMBE VARSHA NARAYAN	B.Pharmacy	Mahatma Gandhi Vidya Mandir COP Panchavati, Nashik
95	THETE SANKET BALASAHEB	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
96	TUPE RUTUVARNA EKNATH	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
97	UDAGE VIKAS ASHOK	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
98	VARADE PRIYANKA RAMRAO	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
99	VIKHE JYOTI JAGANNATH	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
100	BAIRAGI SHUBHAM GOKUL	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
101	ANDHALE KAJAL PANDITRAO	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
102	CHAVAN KRUSHNABI RAJENDRA	B.Pharmacy	HSBPVT's GOI College Of Pharmacy, Kashti



103	CHOUHAN PARMINDERKAUR P.	B.Pharmacy	Sinhagad Institute of Pharmacy, Narhe, Pune
104	DALE ANKITA RAJENDRA	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
105	GHOARE KIRAN VIJAY	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
106	JADAV ARTI MHATARDEO	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
107	JOSHI ASHVINI VILAS	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
108	JOSHI SHRADDHA DATTATRYA	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
109	KADU SHEHA VENUNATH	B.Pharmacy	Dr. LH Hirnandani College of Pharmacy, Ulhasnagar
110	KHARDE RAHUL KESHAV	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
111	KOLEKAR ARCHANA KANIFNATH	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
112	NAWATHE GANESH KISHAN	B.Pharmacy	Padmashri Dr. Vithalrao Vikhe Patil College of Pharmacy, Viladghat
113	MADANE NILESH NAMDEVRAO	B.Pharmacy	RTM Nagpur University : Dept. of Pharmaceutical Sci. Nagpur
114	MADRI RENU RANGASWAM	B.Pharmacy	Swami Vivekanand Education Society's COP, Chembur
115	MAHAJAN MILIND UMAKANT	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
116	MOTE SHITAL PRALHAD	B.Pharmacy	Sanjivani College of Pharmaceutical Education & Research, Kopergeon
117	PAWADE PRATIBHA SAHEBRAO	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
118	SHARMALE MANISHA NANASAHEB	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
119	SHELKE ADITYA SHIRISH	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
120	SINARE SUJAL BALASAHEB	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
121	SURADKAR ANKITA ASHOK	B.Pharmacy	SRTM University, Nanded School of Pharmacy
122	TAMBE ARTI DINKAR	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
123	WAGHMARE SWAPNIL SUNIL	B.Pharmacy	AISSMS College Of Pharmacy, Pune
124	ZODAGE MUKESH BABURAO	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
125	ASAVA TEJSHWINI LALCHAND	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
126	BHANDARI AKSHAY SHRIRAM	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
127	BRAHMANE SUJATA SANTOSH	B.Pharmacy	Maharashtra institute of pharmacy kothrud Pune
128	CHAVAN SNEHA SHRIRAM	B.Pharmacy	SNDDT, Mumbai
129	CHOKHAR SANDESH MADHUKAR	B.Pharmacy	NDMVP College Of Pharmacy, Nashik
130	DEORAYE SONAL SUBHASH	B.Pharmacy	Pravara Rural College of Pharmacy, Loni



131	DIGHE RAJASHRI SUBHASH	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
132	GARJE NILESH UDDHAV	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
133	GHATUL BALASAHEB BABASAHEB	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
134	GHOLAP SUPRIYA TATYASAHEB	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
135	GHOLAP VISHAL DILIP	B.Pharmacy	NDMVP College Of Pharmacy, Nashik
136	GHORPADE ANUJA MACCHINDRA	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
137	GITE SAMBHAJI TUKARAM	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
138	GODE PRIYANKA GHANSHAM	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
139	JADHAV POOJA GORAKSHNATH	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
140	KHAMKAR RUPALI RAVINDRA	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
141	JADHAV VISHAL BABASAHEB	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
142	KHEMNAR KAVITA BHAUSAHEB	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
143	KUTE NIKHIL NARAYAN	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
144	MORE PPRIYANKA HIRAMAN	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
145	MALI SHUBHANGI RAOSAHEB	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
146	NIGHUTE PRIYANKA RAMESH	B.Pharmacy	NDMVP College Of Pharmacy, Nashik
147	NIRHALI SIDDAHRTH DILIP	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
148	PATEL SALMAN RAJU	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
149	PHALKE SHUBHANGI SAMBHAJI	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
150	PUALTE SUJATA EKNATH	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
151	SHAIKH SHOIB SHAKIL	B.Pharmacy	Amrutvahini College Of Pharmacy, Sangamner
152	SONUNE SWAPNALI SARANGDHAR	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
153	VIKHE DATTAPRASAD NAVNATH	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
154	SURADKAR ASHWIN SANJAY	B.Pharmacy	Pravara Rural College of Pharmacy, Loni
155	ZENDE TEJAL PRAFULLA	B.Pharmacy	Poona College of Pharmacy, Pune
156	TAMBE SNEHAL KAILAS	B.Pharmacy	Mahatma Gandhi Vidya Mandir COP Panchavati, Nashik

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**PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI**

AHER SNEHAL BALASAHEB

State Common Entrance Test Cell, Maharashtra State, Mumbai
8th Floor, New Excelsior Building, A.K. Nayak Marg, Fort, Mumbai-400001. (M.S.)
Receipt-cum-Acknowledgement of Institute Level Admission as for Admission to First
Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharmacy /
Pharm. D. (Post Baccalaureate)) for the year 2019 - 2020
Application ID : MPH1901326

Personal Details :
Full Name SNEHAL BALASAHEB AHER
Nationality Indian
Gender Female
Category-Caste OBC - Kunabi
Applied For EWS NA
PM Type N.A.
Date of Birth 03-01-1998
Annual Family Income (₹) 50,001 - 1,00,000

Type of Candidature Maharashtra State Candidate - Type A
English Medium No
Graduation Institute
Graduation Course

Seat Acceptance Fee is filled by online payment of Rs. 1000/-
Paid Amount (₹) ₹ 1000/- Payment Status Successful Transaction Id 8c5c0b913ee0efbbdd9

Institute Details :
Institute Name 5185 - Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar (Un-Aided - Non-Autonomous - Non-Minority)
Course Name 5185021D-Pharmaceutical Chemistry
Tuition Fee (₹) 0/-
Development Fee (₹) 0/-
Other Fee (₹) 0/-
Total Fee (₹) 0/-
Admission Date 19-08-2019
Admission Type Against CAP
Remark confirmed

Declaration by Candidate : I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the Institute/College will have rights to expel, suspend me from the Institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.
Date: 19-08-2019
Signature of Candidate (SNEHAL BALASAHEB AHER)

Place :

INSTITUTE USE ONLY
Declaration by the College/Institute : We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course in Pharmacy (M. Pharmacy / Pharm. D. (Post Baccalaureate)) for the year 2019-2020 on verification of Candidate's identity. The candidate has paid the fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Signature of Institute Officer (5185)
Reported By: 5185
Printed By: 5185
Pravaranagar, Last Modified By: 5185

Reported On: 19-08-2019 09:52:20 AM
Printed On: 19-08-2019 09:52:26 AM
Last Modified On: 19-08-2019 09:52:20 AM
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Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni- 413736



**PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI**

AHER VAISHNAVI CHANDRAKANT

State Common Entrance Test Cell, Maharashtra State, Mumbai
8th Floor, New Excelsior Building, A.K. Nayak Marg, Fort, Mumbai-400001. (H.S.)
Receipt-cum-Acknowledgement of Institute Level Admission as for Admission to First
Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharmacy /
Pharm. D. (Post Baccalaureate)) for the year 2019 - 2020
Application ID : MPIL19101293

Personal Details :
Full Name: VAISHNAVI CHANDRAKANT AHER
Nationality: Indian
Gender: Female
Category-Caste: OBC - Kunabi
Applied For: EWS No.
PH Type: N.A.
Date of Birth: 27-07-1998
Annual Family Income (₹): 50,001 - 1,00,000

Type of Candidate: Maharashtra State Candidate - Type A
English Medium No
Graduation Institute
Graduation Course

Seat Acceptance Fee is filled by online payment of Rs. 1000/-
Paid Amount (₹): ₹ 1000/-
Payment Status: Successful
Transaction ID: 005d2140270e3915a2e3

Institute Details :
Institute Name: S185 - Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar (Un-Aided - Non-Autonomous - Non-Minority)
Tuition Fees (₹) 0/-
Development Fees (₹) 0/-
Other Fees (₹) 0/-
Total Fees (₹) 0/-
Course Name: S18512610-Quality Assurance Techniques
Admission Date: 19-08-2019
Admission Type: Against CAP
Remark confirmed

Declaration by Candidate : I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the Institute/College will have rights to expel, discontinue me from the Institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.
Date: 19-08-2019
Place :
Signature of Candidate: (VAISHNAVI CHANDRAKANT AHER)

INSTITUTE USE ONLY
Declaration by the College/Institute : We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course in Pharmacy (M. Pharmacy / Pharm. D. (Post Baccalaureate)) for the year 2019-2020 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Reported On: 19-08-2019 09:55:36 AM
Printed On: 19-08-2019 09:55:41 AM
Last Modified On: 19-08-2019 09:55:36 AM
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Signature of Institute Officer (S185)
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni- 413 736
Reported By: S185
Printed By: S185
Last Modified By: S185

Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni- 413 736



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

AHIRE KOMAL DILIP

State Common Entrance Test Cell, Maharashtra State, Mumbai

State Common Entrance Test Cell, Maharashtra State, Mumbai
8th Floor, New Excelsior Building, A.K. Nayak Marg, Fort, Mumbai-400001. (M.S.)
Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of
Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharmacy / Pharm. D.
(Post Baccalaureate)) for the year 2019 - 2020

Application ID : MPH19202028

Mode of Admission : Non Sponsored

Personal Details

Full Name: AHIRE KOMAL DILIP

Nationality: Indian

Gender: Female

Date of Birth: 23-05-1997

Annual Family Income (₹): 60,001 - 1,00,000

Category-Caste: OBC -Kunabi

Religious: Minority/Linguistic N.A.

Minority: Minority

PWD Type: N.A.

Type of Candidature: Maharashtra State Candidate - Type A

Allotment Details

All India Merit Number: 1056

Allotted Choice Code: 515401710

Allotted Seat Type: GOBC

Preference No.: 2

Reporting Details

Institute: Mahatma Gandhi Vidya Mandir's Pharmacy College, Panchavati, Nashik

Tuition Fees (₹): 67144/-

Development Fees (₹): 12045/-

Other Fees (₹): 5381/-

Total Fees (₹): 84570/-

Course: 515401710-Pharmaceuticals

Admission Date: 03-08-2019

Admission Type: CAP Round

Remark: Admitted

Declaration by Candidate: I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the Institute/College will have right to expel, discontinue me from the Institute, for any infringement of the rules prescribed by the College/Institute/University/Government and the undertaking given above.

Date: 03-08-2019

Place: Nashik

Signature of The Candidate (AHIRE KOMAL DILIP)

Barcode

INSTITUTE USE ONLY

Declaration by the College/Institute: We hereby declare that, we are admitting this Candidate in our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharmacy / Pharm. D. (Post Baccalaureate)) for the year 2019 - 2020 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Mahatma Gandhi Vidya Mandir's Pharmacy College, Panchavati, Nashik

Signature of Institute Officer (5154)

Reported On: 03-08-2019 12:58:29 PM

Printed On: 03-08-2019 12:59:09 PM

Last Modified On: 03-08-2019 12:58:29 PM

Reported By: 5154

Printed By: 5154

Last Modified By: 5154

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Principal

Pravara Rural College of Pharmacy, Loni

Pravara Rural College of Pharmacy, Loni



**PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI**

ANDHALE CHAITALI SANJAY

2019 State Common Entrance Test Cell, Maharashtra State, Mumbai

90

State Common Entrance Test Cell, Maharashtra State, Mumbai
8th Floor, New Executive Building, A.K. Huzak Marg, Fort, Mumbai-400001, (M.S.)
Receipt-cum-Acknowledgement of Seat Acceptance of CAP Round - III For Admission to First Year Of Two Year Full Time Post-Graduate
Course in Pharmacy (M. Pharmacy / Pharm. D. (Post Baccalaureate)) for the year 2019 - 2020

Application ID : MPH19201105
Version No : 1

Personal Details

Full Name ANDHALE CHAITALI SANJAY	Date of Birth 20-11-1997
Gender female	Person with Disability N/A
Annual Family Income (₹) 15,001 - 50,000	Category for Admission NT-3 (NT-D) - Var-Jat
Category NT-3 (NT-D) - Var-Jat	Religious Minority N/A
Linguistic Minority N/A	Orphan N/A
EWS N/A	SSC Aggregate 71.88 %
Qualifying Exam SSC	HSC Aggregate 82.23 %
Qualifying Exam HSC	Bohem Aggregate N/A
Qualifying Exam System (Appearing)	

GPAT Examination Details

Roll No HSD1200016	Score 72
--------------------	----------

Provisional Allotment Details for CAP Round - III

Institute Allotted	3185-Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Course Allotted	Pharmaceutics
Choice Code Allotted	5183A/518
Seat Type Allotted	GDHC

Seat Acceptance Fee Details

Payment Status Successful	Paid Amount ₹ 1000/-
Remark	

Seat Acceptance Status: Confirmed

Seal of ARCS012

Signature of Candidate (ANDHALE CHAITALI SANJAY)

Signature of ARC Officer (ARCS012)
Confirmed By: ARCS012
Printed By: ARCS012
Last Modified By: ARCS012

Declaration: We hereby declare that, we are reporting this Candidate to our ARC for M. Pharmacy 2019 - 2020 on verification of Candidate's Identity. The Candidate has paid the Fee mentioned in this receipt. We also declare that the seat acceptance form of Candidate is confirmed in presence of the Candidate.

Confirmed On: 13-08-2019 11:44:33 AM
Printed On: 13-08-2019 11:44:37 AM
Last Modified On: 13-08-2019 11:44:33 AM
URL: <http://admission3012019.mahacet.org.in/cet2019/mpharm19/index.php/arccontroller/admin/Receipt?id=5&NTA1&round=www>
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Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni- 413 736



PRAVARA RURAL EDUCATION SOCIETY'S
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OF PHARMACY
LONI

AROTE TANUJA BARAKU

State Common Entrance Test Cell, Maharashtra State, Mumbai
8th Floor, New Excelstar Building, A.K. Nayak Marg, Fort, Mumbai-400001.
(M.S.)

Receipt-cum-Acknowledgement of Institute Reporting for Admission to First
Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M.
Pharmacy / Pharm. D. (Post Baccalaureate)) for the year 2019 - 2020

Application ID : MPH19203736 Mode of Admission : Non Sponsored

Personal Details

Full Name: AROTE TANUJA BARAKU Gender: Female

Nationality: Indian Annual Family Income (₹): 13,000 / 50,000

Date of Birth: 31-05-1998

Category-Caste (PBC): 

Religion: PWD Type: N/A

Minority/Linguistic (L) & Type of Candidature: Maharashtra State Candidate - Type A

Muslim Admission Details

All India Merit Number: 253

Allotted Choice Code: 636112610

Allotted Seat Type: OPEN

Preference No.: 1

Reporting Details

Institute: Vishal Institute of Pharmaceutical Education & Research, A/c, (Alephata), Dist. Pune

Tuition Fees (₹): 40722/- Course: 636112610-Quality

Development Fees (₹): 0/- Admission Date: 13-08-2019

Other Fees (₹): 0/- Admission Type: AP Round

Total Fees (₹): 40722/-

Remark: ADHBT110

Declaration by Candidate: I hereby agree to comply with all the stipulated by Government. I hereby undertake that I am a student of College/Institute. I am not employed in a capacity which may involve competing the authorities to take admission. I have undertaken that I am not employed in any capacity which may involve competing the authorities to take admission. I have undertaken that I am not employed in any capacity which may involve competing the authorities to take admission. I have undertaken that I am not employed in any capacity which may involve competing the authorities to take admission.

Date: 13-08-2019 Signature of The Candidate: AROTE TANUJA BARAKU

Place: 

INSTITUTE USE ONLY

Declaration by the College/Institute: I hereby declare that we are admitting the Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharmacy / Pharm. D. (Post Baccalaureate)) for the year 2019 - 2020 on the basis of Candidate's merit. The Candidate has taken the Post-Graduate in this report. We also declare that the admission of candidate is confirmed in presence of the Candidate.

Seal of Vishal Institute of Pharmaceutical Education & Research, A/c, (Alephata), Dist. Pune

Signature of Institute Officer (6361)

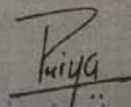
Reported On: 13-08-2019 05:00:00 PM Reported By: 6361

Printed On: 13-08-2019 05:06:22 PM Printed By: 6361

Last Modified On: 13-08-2019 05:06:00 PM Last Modified By: 6361

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Principal

Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni- 413736



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

AUTADE SHRADDHA K.

01/06/19

State Common Entrance Test Cell, Maharashtra State, Mumbai

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State Common Entrance Test Cell, Maharashtra State, Mumbai
8th Floor, New Excelstar Building, A.K. Nayak Marg, Fort, Mumbai-400001.(M.S.)
Receipt-cum-Acknowledgement of Seat Acceptance of 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 2019 - 2020

Application ID :
MPH19201573

Version No : 1

Personal Details

Full Name	AUTADE SHRADDHA KATLAS
Gender	Female
Annual Family Income (₹)	7,00,001 - 8,00,000
Category	OBC - Kunabi
Linguistic Minority	N.A.
EWS	N.A.
Qualifying Exam SSC	
Qualifying Exam HSC	
Qualifying Exam Bpharm (Appearing)	

Date of Birth	02-09-1997
Person with Disability	N.A.
Category for Admission	OBC - Kunabi
Religious Minority	N.A.
Orphan	N.A.
SSC Aggregate	70.55 %
HSC Aggregate	49.54 %
Bpharm Aggregate	NA

GPAT Examination Details

Roll No.	MR01200304
Score	68

Provisional Allotment Details for CAP Round - II

Institute Allotted	5185-Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Course Allotted	Quality Assurance Techniques
Choice Code Allotted	518512610
Seat Type Allotted	GOBC

Seat Acceptance Fee Details

Payment Status	Successful
Remark	
Paid Amount (₹)	₹ 1000/-

Seat Acceptance Details

Seat Acceptance Status:	Freeze
Seat Acceptance Confirmation Details:	Confirmed
Date	01-08-2019

Place :

Signature of Candidate
(AUTADE SHRADDHA KATLAS)

Declaration : We hereby declare that, we are reporting this Candidate to our ARC for M - Pharmacy 2019 - 2020 on verification of Candidate's Identity. The Candidate has paid the Fees mentioned in this receipt. We also declare that the seat acceptance form of Candidate is confirmed in presence of the Candidate.

ARC Use Only

Confirmed On : 01-08-2019 02:22:52 PM

Printed On : 01-08-2019 02:22:54 PM

Last Modified On : 01-08-2019 02:22:52 PM

URL: <http://admission3cet2019.mahacet.org.in/cet2019/mpharm19/index.php/ArcController/admitReceipt?id=MJAxNTcz&nd=Mg==>

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Seal of ARC5012

Signature of ARC Officer (ARC5012)

Confirmed By: ARC5012

Printed By: ARC5012

Last Modified By: ARC5012

Principal
Pravara Rural College of Pharmacy
Pravaranagar, Loni- 413736



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

DIGHE SWAMINI AVINASH

State Common Entrance Test Cell, Maharashtra State, Mumbai	
8th Floor, New Excelsior Building, A.K. Nayak Marg, Fort, Mumbai-400001. (M.S.)	
Receipt-cum-Acknowledgement of Seat Acceptance of CAP Round - I for Admission to First Year	
Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharmacy / Pharm. D. (Post Baccalaureate)) for the year 2019 - 2020	
Application ID : MPH19200408	
Version No : 1	
Personal Details	
Full Name DIGHE SWAMINI AVINASH	Date of Birth 30-04-1997
Gender Female	Person with Disability N.A.
Annual Family Income (₹) 50,001 - 1,00,000	Category for Admission OPEN
Category OBC - Kunabi	Religious Minority N.A.
Lingualistic Minority N.A.	Orphan N.A.
EWS N.A.	SSC Aggregate 87.64 %
Qualifying Exam SSC	HSC Aggregate 74.77 %
Qualifying Exam HSC	Bpharm Aggregate NA
Qualifying Exam Bpharm (Appearing)	
GPAT Examination Details	
Roll No MR01200134	Score 108
Provisional Allotment Details for CAP Round - I	
Institute Allotted	5185-Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Course Allotted	Quality Assurance Techniques
Choice Code Allotted	518512610
Seat Type Allotted	OPEN
Seat Acceptance Fee Details	Paid Amount (₹) ₹ 1000/-
Payment Status Successful	Remark
Seat Acceptance Details	
Seat Acceptance Status:	Freeze
Seat Acceptance Confirmation Details:	Confirmed
Date: 22-07-2019	Signature of Candidate (DIGHE SWAMINI AVINASH)
Place: LONI	
ARC Use Only	
Declaration : We hereby declare that, we are reporting this Candidate to our ARC for M - Pharmacy 2019 - 2020 on verification of Candidate's Identity. The Candidate has paid the Fees mentioned in this receipt. We also declare that the seat acceptance form of Candidate is confirmed in presence of the Candidate.	
Confirmed On: 22-07-2019 10:19:18 AM	Signature of ARC Officer (ARC5012)
Printed On : 22-07-2019 10:19:20 AM	Confirmed By: ARC5012
Last Modified On : 22-07-2019 10:19:18 AM	Printed By: ARC5012
URL: http://admission3cet2019.mahacet.org.in/cet2019/mpharm19/Index.php/ArcController/admitReceipt?Id=MJAwnDA4&md=MQ==	Last Modified By: ARC5012
Copyright 2019-2020 All rights reserved. Best viewed at 1024 X 768 resolution. Browser support Mozilla Firefox 2.0 & above , I.E. 7 & above.(1,,)	

Seal of ARC5012

Principal

Pravara Rural College of Pharmacy
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PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
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LONI

GHORPADE GAURAVI ANIL

(76)


सत्यमेव जयते



State Common Entrance Test Cell, Maharashtra State, Mumbai
8th Floor, New Excelsior Building, A.K. Nayak Marg, Fort, Mumbai-400001. (M.S.)
Receipt-cum-Acknowledgement of Seat Acceptance of CAP Round - I for Admission to First Year
Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharmacy / Pharm. D. (Post
Baccalaureate)) for the year 2019 - 2020



Application ID : MPH19204551
Version No : 1

Personal Details

Full Name GHORPADE GAURAVI ANIL	
Gender Female	Date of Birth 18-01-1998
Annual Family Income (₹) 5,50,001 - 6,00,000	Person with Disability N.A.
Category OBC - Kunbi Maratha	Category for Admission OBC - Kunbi Maratha
Linguistic Minority N.A.	Religious Minority N.A.
EWS N.A.	Orphan N.A.
Qualifying Exam SSC	SSC Aggregate 74.00 %
Qualifying Exam HSC	HSC Aggregate 57.23 %
Qualifying Exam Bpharm (Appearing)	Bpharm Aggregate NA

GPAT Examination Details

Roll No MR09200991	Score 90
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Provisional Allotment Details for CAP Round - I

Institute Allotted	5185-Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar	
Course Allotted	Quality Assurance Techniques	
Choice Code Allotted	518512610	
Seat Type Allotted	GOBC	

Seat Acceptance Fee Details

Payment Status Successful	Paid Amount (₹)	₹ 1000/-
Remark		

Seat Acceptance Details

Seat Acceptance Status:	Freeze
Seat Acceptance Confirmation Details:	Confirmed

Date: 22-07-2019

Place:

Signature of Candidate
(GHORPADE GAURAVI ANIL)



Declaration : We hereby declare that, we are reporting this Candidate to our ARC for M - Pharmacy 2019 - 2020 on verification of Candidate's Identity. The Candidate has paid the Fees mentioned in this receipt. We also declare that the seat acceptance form of Candidate is confirmed in presence of the Candidate.

ARC Use Only

Confirmed On: 22-07-2019 10:38:08 AM
Printed On: 22-07-2019 10:38:09 AM
Last Modified On: 22-07-2019 10:38:08 AM
URL: <http://admission3cet2019.mahacet.org.in/cet2019/mpharm19/index.php/ArcController/admitReceipt?Id=MJA0NTUx&rnd=MQ==>
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Seal of ARC5012

Signature of ARC Officer (ARC5012)
Confirmed By: ARC5012
Printed By: ARC5012
Last Modified By: ARC5012





PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
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GONDKAR SHRADDHA RAJENDRA

6/14/2019 State Common Entrance Test Cell, Maharashtra State, Mumbai

State Common Entrance Test Cell, Maharashtra State, Mumbai
8th Floor, New Excelsior Building, A.K. Nayak Marg, Fort, Mumbai-400001 (M.S.)
Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of
Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharmacy / Pharm. D.
(Post Baccalaureate)) for the year 2019 - 2020

Application ID : MPH19202059 Mode of Admission : Non Sponsored

Personal Details

Full Name: GONDKAR SHRADDHA RAJENDRA

Nationality: Indian Gender: Female

Date of Birth: 15-04-1998 Annual Family Income (₹): 15,001 - 50,000

Category: Casta: OPEN Religious: Minority/Linguistic M.A. Minority: PWD Type: N.A.

Type of Candidature: Maharashtra State Candidate - Type A

Allotment Details

All India Merit Number: 1455

Allotted Choice Code: 119162110

Allotted Seat Type: 051

Preference No.: 1

Reporting Details

Institute: Padmashree Dr. Vithalrao Vikhe Patil Foundation's College of Pharmacy, Ahmednagar

Tuition Fees (₹): 48672/- Course: 519153110-Pharmaceutics

Development Fees (₹): 12655/- Admission Date: 14-08-2019

Other Fees (₹): 1454/- Admission Type: CAP Round

Total Fees (₹): 62781/-

Remark: Confirmed admission

Declaration by Candidate: I hereby agree to conform to rules, acts and laws notified by Government. I hereby undertake that as long as I am student of College/Institute, I will act behave in a manner which shall not be in compliance with the guidelines or any disciplinary action against me. I fully understand that the Principal/Director of the Institution/Institute will have rights to report, suspend me from the Institute, for any misbehavior or violation of rules, acts and laws notified by Government and the undersigned government.

Date: 14-08-2019

Place: Ahmednagar

Signature of The Candidate: (GONDKAR SHRADDHA RAJENDRA)

INSTITUTE USE ONLY

Declaration by the College/Institute: We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharmacy / Pharm. D. (Post Baccalaureate)) for the year 2019 - 2020 on verification of Candidate's Identity. The candidate has paid the fees mentioned in this receipt. We hereby declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Padmashree Dr. Vithalrao Vikhe Patil Foundation's College of Pharmacy, Ahmednagar

Principal: (Signature) Principal

Signature of Institute Officer (5191): (Signature) Ahmednagar

Reported On: 14-08-2019 04:00:34 PM

Printed On: 14-08-2019 04:00:51 PM

Last Modified On: 14-08-2019 04:00:34 PM

Reported By: 5191

Printed By: 5191

Last Modified By: 5191

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Principal: (Signature) Principal

Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni- 413 736



PRAVARA RURAL EDUCATION SOCIETY'S
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KHANDARE TUSHAR RAJENDRA

8/14/2019
State Common Entrance Test Cell, Maharashtra State, Mumbai

 State Common Entrance Test Cell, Maharashtra State, Mumbai
8th Floor, New Excelsior Building, A.K. Nayak Marg, Fort, Mumbai-400001.(M.S.)
Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of
Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharmacy / Pharm. D.
(Post Baccalaureate)) for the year 2019 - 2020

Application ID : MPH19201288
Mode of Admission : Non Sponsored

Personal Details

Full Name	KHANDARE TUSHAR RAJENDRA		
Nationality	Indian	Gender	Male
Date of Birth	29-09-1997	Annual Family Income (₹)	15,001 - 50,000
Category-Caste	NT 3 (NT-D) -Vanjari		
Religious	Minority/Linguistic N.A		
Minority	Minority		
PWD Type	N.A.		
Type of Candidature	Maharashtra State Candidate - Type A		

Allotment Details

All India Merit Number	870
Allotted Choice Code	518681710
Allotted Seat Type	GOPEN
Preference No.	4

Reporting Details

Institute	R. C. Patel Institute of Pharmaceutical Education and Research, Shirpur		
Tuition Fees (₹) 0/-	Course	518681710-Pharmaceutics	
Development Fees (₹) 15020/-	Admission Date	14-08-2019	
Other Fees (₹) 0/-	Admission Type	CAP Round	
Total Fees (₹) 15020/-	Remark	Admitted	

Declaration by Candidate : I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the institute/college will have rights to expel, rusticate me from the Institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

Date: 14-08-2019
Place: Shirpur

Signature of The Candidate
(KHANDARE TUSHAR RAJENDRA)

INSTITUTE USE ONLY

Declaration by the College/Institute : We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharmacy / Pharm. D. (Post Baccalaureate)) for the year 2019 - 2020 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

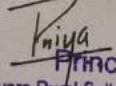
Seal of R. C. Patel Institute of Pharmaceutical Education and Research, Shirpur

Signature of Institute Officer (5186)
REGISTRAR
R.C.Patel Inst of Pharm. Edu & Res
Shirpur, Dist. Chhate 425 405

Reported On : 14-08-2019 02:29:28 PM
Printed On : 14-08-2019 02:29:42 PM
Last Modified On : 14-08-2019 02:29:28 PM

Reported By : 5186
Printed By : 5186
Last Modified By : 5186

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Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni- 413 736



PRAVARA RURAL EDUCATION SOCIETY'S
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OF PHARMACY
LONI

KHULE SHUBHAM JAGANNATH

State Common Entrance Test Cell, Maharashtra State, Mumbai 8th Floor, New Excelior Building, A.K. Nayak Marg, Fort, Mumbai-400001 (M.S.) Receipt-cum-Acknowledgement of Institute Level Admission as for Admission to First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharmacy / Pharm. D. (Post Baccalaureate)) for the year 2019 - 2020	
Application ID : MPH19201919	
Personal Details :	
Full Name	KHULE SHUBHAM JAGANNATH
Nationality	Indian
Gender	Male
Category-Caste	OBC - Kunabi
Applied For EWS	No
PH Type	N.A.
Type of Candidature	Maharashtra State Candidate - Type A
English Medium	No
Graduation Institute	
Graduation Course	
Seat Acceptance Fee is filled by online payment of Rs. 1000/-	
Paid Amount (₹)	1000/-
Payment Status	Successful
Transaction Id	477be91d1971a576fdeb
Institute Details :	
Institute Name	5197 - Jagdamba Education Society, S.N.D. College of Pharmacy Babhulgaon, Nashik (Un-Aided - Non-Autonomous - Non-Minority)
Tuition Fees (₹)	25000/-
Development Fees (₹)	0/-
Other Fees (₹)	0/-
Total Fees (₹)	25000/-
Course Name	519781710-Pharmaceutics
Admission Date	20-08-2019
Admission Type	Against CAP
Remark	Confirm
Declaration by Candidate : I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the Institute/College will have rights to expel, suspend me from the Institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaken given above.	
Date: 20-08-2019	
Place: Babhulgaon	
Signature of Candidate (KHULE SHUBHAM JAGANNATH)	

INSTITUTE USE ONLY
Declaration by the College/Institute : We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharmacy / Pharm. D. (Post Baccalaureate)) for the year 2019-2020 on verification of Candidate's Identity. The candidate has paid the fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Jagdamba Education Society, S.N.D. College of Pharmacy Babhulgaon, Nashik	
Reported On: 20-08-2019 03:15:21 PM	Signature of Institute Officer (5197)
Printed On : 20-08-2019 05:45:24 AM	Reported By: 5197
Last Modified On : 20-08-2019 03:15:21 PM	Printed By: 5197
	Last Modified By: 5197

Triya
Principal

Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni- 413 736



MEHETRE PRATIKSHA BHAGUJI


State Common Entrance Test Cell, Maharashtra State, Mumbai
8th Floor, New Excelsior Building, A.K. Nayak
Marg, Fort, Mumbai-400001. (M.S.)

**Receipt-cum-Acknowledgement of Institute Level Admission as
for Admission to First Year Of Two Year Full Time Post-Graduate
Course In Pharmacy (M. Pharmacy / Pharm. D. (Post
Baccalaureate)) for the year 2019 - 2020**

Application ID : MPH19203269

Personal Details :

Full Name	MEHETRE PRATIKSHA BHAGUJI		
Nationality	Indian	Date of Birth	30-09-1997
Gender	Female	Annual Family Income (₹)	5,50,001 - 6,00,000
Category-Caste	OBC - Mali		
Applied For EWS	No		
PH Type	N.A.		
Type of Candidature	Maharashtra State Candidate - Type A		
English Medium	No		
Graduation Institute			
Graduation Course			

Seat Acceptance Fee is filled by online payment of Rs. 1000/-

Paid Amount (₹)	₹ 1000/-	Payment Status	Successful	Transaction Id	bad597312e458f3af8a5
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Institute Details :

Institute Name	5191 - Padmashree Dr. Vithalrao Vikhe Patil Foundation's College of Pharmacy, Ahmednagar (Un-Aided - Non-Autonomous - Non-Minority)		
Tuition Fees (₹)	97345/-	Course Name	519181710-Pharmaceutics
Development Fees (₹)	12655/-	Admission Date	19-08-2019
Other Fees (₹)	1454/-	Admission Type	Against CAP
Total Fees (₹)	111454/-	Remark	Confirmed admission.

Declaration by Candidate : I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the institute/college will have rights to expel, rusticate me from the institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

Date: 19-08-2019

Place: Ahmednagar

Signature of Candidate
(MEHETRE PRATIKSHA BHAGUJI)

INSTITUTE USE ONLY

Declaration by the College/Institute : We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Two year Full-Time Post-Graduate Course In Pharmacy (M. Pharmacy / Pharm. D. (Post Baccalaureate)) for the year 2019-2020 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of candidate is confirmed in presence of the Candidate.

Seal of Padmashree Dr. Vithalrao Vikhe Patil
Foundation's College of Pharmacy, Ahmednagar

Principal
College of Pharmacy
Ahmednagar

Reported By: 5191
Printed By: 5191
Last Modified By: 5191

Reported On: 19-08-2019 04:46:46 PM
Printed On: 19-08-2019 04:46:55 PM
Last Modified On: 19-08-2019 04:46:46 PM

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PRAVARA RURAL EDUCATION SOCIETY'S
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LONI

MHASKE SHUBHAM BALASAHEB

State Common Entrance Test Cell, Maharashtra State, Mumbai
8th Floor, New Excelsior Building, A.K. Nayak Marg, Fort, Mumbai-400001.(M.S.)
Receipt-cum-Acknowledgement of Institute Level Admission as for Admission to First
Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharmacy /
Pharm. D. (Post Baccalaureate)) for the year 2019 - 2020
Application ID : MPH19201972

Personal Details :
Full Name MHASKE SHUBHAM BALASAHEB
Nationality Indian
Gender Male
Category-Caste OPEN
Applied For EWS No
PH Type N.A.
Date of Birth 08-04-1998
Annual Family Income (₹) 1,50,001 - 2,00,000

Type of Candidature Maharashtra State Candidate - Type A
English Medium No
Graduation Institute
Graduation Course

Seat Acceptance Fee is filled by online payment of Rs. 1000/-
Paid Amount (₹) ₹ 1000/- Payment Status Successful Transaction Id 6/884a91925dcb17059

Institute Details :
Institute Name SIES - Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar (Un-Aided - Non-Autonomous - Non-Minority)
Course Name SIES12610-Quality Assurance Techniques
Admission Date 19-08-2019
Admission Type Against CAP
Remark confirmed

Tuition Fees (₹) 0/-
Development Fees (₹) 0/-
Other Fees (₹) 0/-
Total Fees (₹) 0/-

Declaration by Candidate : I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the Institute/college will have rights to expel, rusticate me from the Institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.
Date: 19-08-2019
Place :
Signature of Candidate (MHASKE SHUBHAM BALASAHEB)

INSTITUTE USE ONLY
Declaration by the College/Institute : We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course in Pharmacy (M. Pharmacy / Pharm. D. (Post Baccalaureate)) for the year 2019-2020 on verification of Candidate's Identity. The candidate has paid the fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar

Reported On: 19-08-2019 09:59:31 AM
Printed On : 19-08-2019 09:59:38 AM
Last Modified On : 19-08-2019 09:59:31 AM
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Signature of Institute Officer (5185)
Reported By: 5185
Printed By: 5185
Last Modified By: 5185

Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni- 413 736



MORE MAYURI SOMNATH


State Common Entrance Test Cell, Maharashtra State, Mumbai
8th Floor, New Excelsior Building, A.K. Nayak Marg, Fort, Mumbai-
400001. (M.S.)



**Receipt-cum-Acknowledgement of Institute Level Admission as for
Admission to First Year Of Two Year Full Time Post-Graduate
Course In Pharmacy (M. Pharmacy / Pharm. D. (Post
Baccalaureate)) for the year 2019 - 2020**

Application ID : MPH19201201

Personal Details :

Full Name MAYURI SOMNATH MORE
Nationality Indian
Gender Female
Date of Birth 21-01-1998
Annual Family Income (₹) 50,001 - 1,00,000
Category-Caste NT 1 (NT-B) - Bhoj
Applied For EWS No
PH Type N.A.

Type of Candidature Maharashtra State Candidate - Type A
English Medium No
Graduation Institute
Graduation Course

Seat Acceptance Fee is filled by online payment of Rs. 1000/-

Paid Amount (₹) 1000/- **Payment Status** Successful **Transaction Id** 45f514f678b3d0f7a21a

Institute Details :

Institute Name 5198 - S.M.B.T. College Of Pharmacy Nandi Hills, Dhamangaon, Nashik. (Un-Aided - Non-Autonomous - Non-Minority)
Tuition Fees (₹) 0/- **Course Name** 51982210-Pharmaceutical Chemistry
Development Fees (₹) 11345/- **Admission Date** 19-08-2019
Other Fees (₹) 6987/- **Admission Type** Against CAP
Total Fees (₹) 18332/- **Remark** STUDENT ADMITTED

Declaration by Candidate : I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the institute/college will have rights to expel, rusticate me from the institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

Date: 19-08-2019

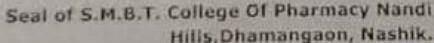
Place

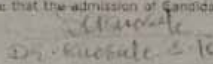

Signature of Candidate
(MAYURI SOMNATH MORE)



INSTITUTE USE ONLY

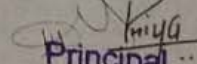
Declaration by the College/Institute. We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharmacy / Pharm. D. (Post Baccalaureate)) for the year 2019-2020 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.


Seal of S.M.B.T. College Of Pharmacy Nandi Hills, Dhamangaon, Nashik.


Signature of Institute Officer (5198)

Reported On: 19-08-2019 03:42:09 PM **Reported By:** 5198
Printed On: 19-08-2019 03:47:44 PM **Printed By:** 5198
Last Modified On: 19-08-2019 03:42:09 PM **Last Modified By:** 5198

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(I.E. 7 & above. (1..))


Principal
Pravara Rural College of Pharmacy
S.M.B.T. College of Pharmacy (M. Pharm.)
Nandi-Hills, Dhamangaon,
Tal. Igatpuri, Dist. Nashik.



PRAVARA RURAL EDUCATION SOCIETY'S

PRAVARA RURAL COLLEGE
OF PHARMACY

LONI

NANNAWARE PREMJJIT SUDHAKAR

State Common Entrance Test Cell, Maharashtra State, Mumbai
8th Floor, New Excelsior Building, A.K. Nayak Marg, Fort, Mumbai-400001. (M.S.)
Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of Two Year
Full Time Post-Graduate Course In Pharmacy (M. Pharmacy / Pharm. D. (Post Baccalaureate))
for the year 2019 - 2020

Application ID : MPH19201887 Mode of Admission : Non Sponsored

Personal Details

Full Name NANNAWARE PREMJJIT SUDHAKAR

Nationality Indian Gender Male

Date of Birth 25-08-1997 Annual Family Income (₹) 15,001 - 50,000

Category-Caste NT 1 (NT-B) -Lohar

Religious Minority/Linguistic Minority N.A.

PWD Type N.A.

Type of Candidature Maharashtra State Candidate - Type A

Allotment Details

All India Merit Number 311

Allotted Choice Code 518512610

Allotted Seat Type GOPEH

Preference No. 4

Reporting Details

Institute Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar

Tuition Fees (₹) 0/-

Development Fees (₹) 11885/-

Other Fees (₹) 0/-

Total Fees (₹) 11885/-

Remark Confirmed

518512610-Quality Assurance Course Techniques

Admission Date 02-08-2019

Admission Type CAP Round

Declaration by Candidate : I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the Institute/College will have rights to expel, rusticate me from the institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

Date: 02-08-2019

Place :

Signature of The Candidate (NANNAWARE PREMJJIT SUDHAKAR)

INSTITUTE USE ONLY

Declaration by the College/Institute : We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharmacy / Pharm. D. (Post Baccalaureate)) for the year 2019 - 2020 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar

Reported On : 02-08-2019 01:20:58 PM

Printed On : 02-08-2019 01:21:10 PM

Last Modified On : 02-08-2019 01:20:58 PM

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Signature of Institute Officer (5185)

Principal

Pravara Rural College of Pharmacy, Pravaranagar, A/p. Loni-413736



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

NIKAM KAVERI VITTHAL

State Common Entrance Test Cell, Maharashtra State, Mumbai
8th Floor, New Excelsior Building, A.K. Nayak Marg, Fort, Mumbai-400001.(M.S.)
Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of Two Year
Full Time Post-Graduate Course In Pharmacy (M. Pharmacy / Pharm. D. (Post Baccalaureate))
for the year 2019 - 2020

Application ID : MPH19202714 Mode of Admission : Non Sponsored

Personal Details

Full Name NIKAM KAVERI VITTHAL
Nationality Indian
Date of Birth 15-06-1998
Gender Female
Annual Family Income ₹ 50,001 - 1,00,000
Category-Caste OBC -Kunabi
Religious Minority/Linguistic Minority A
PWD Type N.A.
Type of Candidature Maharashtra State Candidate - Type A

Allotment Details

All India Merit Number 1700
Allotted Choice Code 518582210
Allotted Seat Type 008C
Preference No. 1

Reporting Details

Institute Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Tuition Fees (₹) 0/-
Development Fees (₹) 6108/-
Other Fees (₹) 0/-
Total Fees (₹) 6108/-
Course 518582210-Pharmaceutical Chemistry
Admission Date 22-07-2019
Admission Type CAP Round

Declaration by Candidate : I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that no long as I am student of College/Institute, I will not engage in a manner which may result in compromising the authorities to take disciplinary action against me. I also undertake that the Principal/Instructor of the institution will have rights to expel, discontinue me from the institute, for any infringement of the rules prescribed by the college/institute/university/government and the undersigned person(s).

Date 22-07-2019

Signature of the Candidate (NIKAM KAVERI VITTHAL)

Place :

INSTITUTE USE ONLY

Declaration by the College/Institute : We hereby declare that we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharmacy / Pharm. D. (Post Baccalaureate)) for the year 2019 - 2020 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar

Signature of Institute Officer (5185)

Principal

Reported By: 5185

Printed By: 5185

Printed On 22-07-2019 04:07:50 PM

Last Modified On 22-07-2019 04:07:50 PM

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Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736



PRAVARA RURAL EDUCATION SOCIETY'S

PRAVARA RURAL COLLEGE
OF PHARMACY

LONI

NIMSE RUSHIKESH BALASAHEB

State Common Entrance Test Cell, Maharashtra State, Mumbai
8th Floor, New Excelstar Building, A. K. Nayak Marg, Fort, Mumbai-400001 (H.S.)
Receipt-cum-Acknowledgement of Institute Level Admission as for Admission to First
Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharmacy / Pharm.
D. (Post Baccalaureate)) for the year 2019 - 2020

Application ID : MPH19201755

Personal Details :

Full Name	NIMSE RUSHIKESH BALASAHEB		
Nationality	Indian		
Gender	Male	Date of Birth	15-08-1992
Category-Caste	OPEN	Annual Family Income (*)	1,50,001 - 2,00,000
Applied For EWS	No		
PH Type	N.A.		
Type of Candidature	Maharashtra State Candidate - Type A		
English Medium	No		
Graduation Institute			
Graduation Course			

Seat Acceptance Fee is filled by online payment of Rs. 1000/-

Paid Amount (*)	Rs. 1000/-	Payment Status	Successful	Transaction Id	19070574600000000000
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Institute Details :

Institute Name	5197 - Jagdamba Education Society, S.N.D. College of Pharmacy Bahulgaon, Nashik (M. Pharm)		
Tuition Fees (*)	20000/-	Course Name	5197B1710-Pharmaceutics
Development Fees (*)	0/-	Admission Date	20-08-2019
Other Fees (*)	0/-	Admission Type	Against CAP
Total Fees (*)	20000/-	Remark	Confirm

Declaration by Candidate : I hereby agree to conform to rules, acts and laws entered by Government. I hereby undertake that as long as I am student of College / Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Institute / Government and the undersigned person above.

Date: 20-08-2019

Place: Bahulgaon

Signature of Candidate
(NIMSE RUSHIKESH BALASAHEB)

INSTITUTE USE ONLY

Declaration by the College/Institute : We hereby declare that, we are admitting the Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharmacy / Pharm. D. (Post Baccalaureate)) for the year 2019-2020 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in accordance of the Candidate.

Seal of Jagdamba Education Society, S.N.D. College of Pharmacy Bahulgaon, Nashik

Reported On: 20-08-2019 03:06:36 PM

Printed On: 20-08-2019 09:36:37 AM

Last Modified On: 20-08-2019 03:06:36 PM

Signature of Institute Officer (5197)

Reported By: 5197

Printed By: 5197

Last Modified By: 5197

Priya
Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413 736



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

PATIL VAISHNAVI SHIVAJI


State Common Entrance Test Cell, Maharashtra State, Mumbai
8th Floor, New Excelsior Building, A.K. Nayak Marg, Fort, Mumbai-400001 (M.S.)
Receipt-cum-Acknowledgement of Seat Acceptance of CAP Round - III for Admission to First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharmacy / Pharm. D. (Post Baccalaureate)) for the year 2019 - 2020

Application ID : MPH19201484 Version No

Personal Details

Full Name: PATIL VAISHNAVI SHIVAJI	Date of Birth: 27-09-1997
Gender: female	Person with Disability: N/A
Annual Family Income (₹): 50,001 - 1,00,000	Category for Admission: OPEN
Category: OPEN	Religious Minority: N/A
Linguistic Minority: N/A	Orphan: N/A
EWS: N/A	SSC Aggregate: 63.60 %
Qualifying Exam: SSC	MEC Aggregate: 76.62 %
Qualifying Exam: HSC	Pharm Aggregate: NA
Qualifying Exam: Barm (Appearing)	

GPAT Examination Details

Roll No: HRG1200034	Score: 62
---------------------	-----------

Provisional Allotment Details for CAP Round - III

Institute Allotted	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Course Allotted	Quality Assurance Technician
Choice Code Allotted	318932630
Seat Type Allotted	001
Seat Acceptance Fee Details	Payment Status: Successful Paid Amount: ₹ 1000/-
Remark:	

Seat Acceptance Details

Seat Acceptance Status:	Freeze
Seat Acceptance Confirmation Details:	Confirmed
Date: 12-09-2019	

Place: Signature of Candidate (with Suriname Stamp)

Declaration: We hereby declare that, we are reporting this Candidate to our ARC for M - Pharmacy 2019 - 2020 on verification of Candidate's Identity. The Candidate has paid the Fee mentioned in this receipt. We also declare that the seat acceptance form of Candidate is confirmed in presence of the Candidate.

Seal of ARC5006 Signature of ARC Officer (ARC5006)

Confirmed On: 12-09-2019 04:41:25 PM Confirmed By: ARC5006

Printed On: 12-09-2019 04:41:26 PM Printed By: ARC5006

Last Modified On: 12-09-2019 04:41:25 PM Last Modified By: ARC5006

URL: <http://admission3042019.mahacet.org.in/cet2019/mpharm19/index.php/arcController/adminReceipt?id=MJ&hDg&rnd=Mw==>

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GOVERNMENT POLYTECHNIC
AHMEDNAGAR
ARC 5006
12 SEP 2019
96


Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni- 413 136



PRAVARA RURAL EDUCATION SOCIETY'S

PRAVARA RURAL COLLEGE
OF PHARMACY

LONI

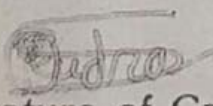
RUDRAWAR ONKAR PRAKASH

KRE Society's
KARNATAKA COLLEGE OF PHARMACY
Manhalli Road, BIDAR-585 403. Ph. 08482-234962

IDENTITY CARD

Name : Rudrawar Onkar Prakash
Address : Alp - Ganga khed.
Card No : 03 Admn. No. 27
Reg. No : 19PQ020
Identification Mark : _____
Blood Group : B+ve.


Principal
Karnataka College of Pharmacy
BIDAR-585 403


Signature of Candidate
Principal
Pravara Rural College of Pharmacy
Manhalli Road, Loni-413 795



**PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI**

SASANE SARITA BABASAHEB

State Common Entrance Test Cell, Maharashtra State, Mumbai
8th Floor, New Excelsior Building, A.K. Nayak Marg, Fort, Mumbai-400001. (M.S.)
Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of Two Year
Full Time Post-Graduate Course In Pharmacy (M. Pharmacy / Pharm. D. (Post Baccalaureate)
for the year 2019 - 2020

Application ID : MPH19200033

Personal Details

Full Name: SASANE SARITA BABASAHEB

Nationality: Indian

Gender: Female

Date of Birth: 21-10-1996

Annual Family Income (INR): 10,000

Category: Caste: SC - Other

Religious Minority/Linguistic Minority: N.A.

PWD Type: N.A.

Type of Candidature: Maharashtra State Candidate - Type A

Admission Details

All India Merit Number: 2508

Allotted Choice Code: 1302216

Allotted Seat Type: OSC

Preference No.: 3

Reporting Details

Institute: Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar

Tuition Fees (₹): 0/-

Development Fees (₹): 0/-

Other Fees (₹): 0/-

Total Fees (₹): 0/-

Remark: Confirmed

Admission Date: 22-07-2019

Admission Type: CAP Round

Declaration by Candidate: I hereby agree to conduct my work with full and complete information to the Government. I hereby undertake that as long as I am student of the Institute, I will not engage in any other activity which may conflict with my studies. I hereby undertake to take the necessary steps to ensure that I am not engaged in any other activity which may conflict with my studies. I hereby undertake to take the necessary steps to ensure that I am not engaged in any other activity which may conflict with my studies.

Date: 22-07-2019

Signature of The Candidate: SASANE SARITA BABASAHEB

Place:

INSTITUTE USE ONLY

Declaration by the College/Institute: We hereby declare that we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharmacy / Pharm. D. (Post Baccalaureate)) for the year 2019 - 2020 on verification of Candidate's Identity. We also declare that the admission of Candidate is on condition of payment of fees as mentioned in this receipt. We also declare that the admission of Candidate is on condition of payment of fees as mentioned in this receipt.

Seal of Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar

Signature of Institute Officer (5)

Reported On: 22-07-2019 04:04:14 PM

Printed On: 22-07-2019 04:05:05 PM

Last Modified On: 22-07-2019 04:04:14 PM

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Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

SHELKE AKASH KAILAS

 State Common Entrance Test Cell, Maharashtra State, Mumbai
8th Floor, New Excelsior Building, A.K. Nayak Marg, Fort, Mumbai-400001.(M.S.)
Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of Two Year
Full Time Post-Graduate Course In Pharmacy (M. Pharmacy / Pharm. D. (Post Baccalaureate))
for the year 2019 - 2020

Application ID : MPH19201025

Mode of Admission : Non Sponsored

Personal Details

Full Name SHELKE AKASH KAILAS
Nationality Indian
Date of Birth 23-04-1997
Gender Male
Annual Family Income (₹) 15,001 - 50,000
Category-Caste SC -Mahar
Religious Minority/Linguistic Minority N.A
PWD Type N.A.
Type of Candidature Maharashtra State Candidate - Type A

Allotment Details

All India Merit Number 1020
Allotted Choice Code 518512610
Allotted Seat Type GOPEN
Preference No. 2

Reporting Details

Institute Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Tuition Fees (₹) 0/-
Development Fees (₹) 0/-
Other Fees (₹) 0/-
Total Fees (₹) 0/-
Remark Confirmed
518512610-Quality Assurance
Course Techniques
Admission Date 02-08-2019
Admission Type CAP Round

Declaration by Candidate : I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of this Institute/College will have rights to expel, rusticate me from the Institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

Date: 02-08-2019

Place :

INSTITUTE USE ONLY

Declaration by the College/Institute : We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharmacy / Pharm. D. (Post Baccalaureate)) for the year 2019 - 2020 on verification of Candidate's Identity. The candidate has paid the fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar

Reported On: 02-08-2019 01:28:16 PM
Printed On : 02-08-2019 01:28:24 PM
Last Modified On : 02-08-2019 01:28:16 PM
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Signature of The Candidate
(SHELKE AKASH KAILAS)

Signature of Institute Officer (5185)

Reported By: 5185
Printed By: 5185
Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni- 413 736



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

SHELKE PRANJALI BABAN

State Common Entrance Test Cell, Maharashtra State, Mumbai 8th Floor, New Excelsior Building, A.K. Nayak Marg, Fort, Mumbai-400001. (M.S.) Receipt-cum-Acknowledgement of Seat Acceptance of CAP Round - I for Admission to First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharmacy / Pharm. D. (Post Baccalaureate)) for the year 2019 - 2020	
Application ID : MPH19201351	Version No : 1
Personal Details	
Full Name: SHELKE PRANJALI BABAN	Gender: Female
Annual Family Income (₹): 15,001 - 50,000	Date of Birth: 22-07-1998
Category: OBC - Kunabl	Person with Disability: N.A.
Linguistic Minority: N.A.	Category for Admission: OBC - Kunabl
EWS: N.A.	Religious Minority: N.A.
Qualifying Exam: SSC	Orphan: N.A.
Qualifying Exam: HSC	SSC Aggregate: 84.36 %
Qualifying Exam: Bpharm (Appearing)	HSC Aggregate: 74.46 %
GPAT Examination Details	Bpharm Aggregate: NA
Roll No: MR09201070	Score: 121
Provisional Allotment Details for CAP Round - I	
Institute Allotted	5105-Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Course Allotted	Pharmaceutical Chemistry
Choice Code Allotted	518582210
Seat Type Allotted	GOPE
Seat Acceptance Fee Details	
Payment Status: Successful	Paid Amount (₹): ₹ 1000/-
Remark:	Pref No Allotted: 4
Seat Acceptance Details	
Seat Acceptance Status:	Freeze
Seat Acceptance Confirmation Details:	Confirmed
Date: 22-07-2019	
Place:	
Declaration: We hereby declare that, we are reporting this Candidate to our ARC for M - Pharmacy 2019 - 2020 on verification of Candidate's Identity. The Candidate has paid the Fees mentioned in this receipt. We also declare that the seat acceptance form of Candidate is confirmed in presence of the Candidate.	
ARC Use Only	
Confirmed On: 22-07-2019 11:30:25 AM	Signature of ARC Officer (ARC5012)
Printed On: 22-07-2019 11:30:27 AM	Confirmed By: ARC5012
Last Modified On: 22-07-2019 11:30:25 AM	Printed By: ARC5012
URL: http://admission3cet2019.mahacet.org.in/cet2019/mpharm19/index.php/ArcController/admitReceipt?Id=MJAxMzUx&rnd=MQ==	Last Modified By: ARC5012
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Seal of ARC5012	
Principal Pravara Rural College of Pharmacy Pravaranagar, A/p. Loni- 413 738	



SHINDE SHARDHA BALASAHEB

7-27-2019
State Common Entrance Test Cell, Maharashtra State, Mumbai

State Common Entrance Test Cell, Maharashtra State, Mumbai
8th Floor, New Excelsior Building, A.K. Nayak Marg, Fort, Mumbai-400001. (M.S.)
Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of
Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharmacy / Pharm. D.
(Post Baccalaureate)) for the year 2019 - 2020

Application ID : MPH19204135
Mode of Admission : Non Sponsored

Personal Details

Full Name SHINDE SHARDHA BALASAHEB
Nationality Indian
Date of Birth 29-01-1998
Gender Female
Annual Family Income (₹) 15,001 - 50,000
Category-Caste OBC - Mail
Religious
Minority/Linguistic N.A.
Minority
PWD Type N.A.

Type of Candidature Maharashtra State Candidate - Type B

Allotment Details

All India Merit Number 1267
Allotted Choice Code 519182110
Allotted Seat Type GOBC
Preference No. 1

Reporting Details

Institute Padmashree Dr. Vithalrao Vikhe Patil Foundation's College of Pharmacy, Ahmednagar
Tuition Fees (₹) 48673/-
Development Fees (₹) 12655/-
Other Fees (₹) 1454/-
Total Fees (₹) 62782/-
Course 519182110-Pharmacology
Admission Date 22-07-2019
Admission Type CAP Round
Remark Confirmed.

Declaration by Candidate : I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the institute/college will have rights to expel, rusticate me from the institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

Date: 22-07-2019
Place: Ahmednagar

Signature of The Candidate
(SHINDE SHARDHA BALASAHEB)

INSTITUTE USE ONLY

Declaration by the College/Institute : We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharmacy / Pharm. D. (Post Baccalaureate)) for the year 2019 - 2020 on verification of Candidate's Identity. The candidate has paid the fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Padmashree Dr. Vithalrao Vikhe Patil Foundation's College of Pharmacy, Ahmednagar

Reported On : 22-07-2019 04:09:41 PM
Printed On : 22-07-2019 04:10:57 PM
Last Modified On : 22-07-2019 04:09:41 PM

Principal
College of Pharmacy (5191)
Ahmednagar

Reported By: 5191
Printed By: 5191
Last Modified By: 5191

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Principal
Pravara Rural College of Pharmacy
Pravaranagar, A.P. Loni- 431 736



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

TAMBE NIKITA SAMPAT

State Common Entrance Test Cell, Maharashtra State, Mumbai
8th Floor, New Excelsior Building, A.K. Nayak Marg, Fort, Mumbai-400001.(M.S.)
Receipt-cum-Acknowledgement of Institute Level Admission as for Admission to First
Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharmacy /
Pharm. D. (Post Baccalaureate)) for the year 2019 - 2020
Application ID : MPH19281289

Personal Details :
Full Name TAMBE NIKITA SAMPAT
Nationality Indian
Gender Female
Category-Caste OPEN
Applied For EWS No
PH Type N.A.
Date of Birth 03-02-1998
Annual Family Income (₹) 6,00,001 - 7,00,000

Type of Candidature Maharashtra State Candidate - Type A
English Medium No
Graduation Institute
Graduation Course

Seat Acceptance Fee is filled by online payment of Rs. 1000/-
Paid Amount (₹) ₹ 1000/- Payment Status Successful Transaction Id b6a7b0b0c76720ccc8c

Institute Details :
Institute Name 5185 - Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar (Un-Aided - Non-Autonomous - Non-Minority)
Tuition Fees (₹) 0/-
Development Fees (₹) 0/-
Other Fees (₹) 0/-
Total Fees (₹) 0/-
Course Name 518582210-Pharmaceutical Chemistry
Admission Date 19-08-2019
Admission Type Against CAP
Remark confirmed

Declaration by Candidate : I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the Institute/College will have rights to expel, rusticate me from the Institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.
Date: 19-08-2019
Signature of Candidate (TAMBE NIKITA SAMPAT)

Place :
INSTITUTE USE ONLY
Declaration by the College/Institute : We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharmacy / Pharm. D. (Post Baccalaureate)) for the year 2019-2020 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar

Reported On: 19-08-2019 09:01:34 AM
Printed On : 19-08-2019 09:01:52 AM
Last Modified On : 19-08-2019 09:01:34 AM
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Signature of Institute Officer (5185)
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni- 413 736
Reported By: 5185
Printed By: 5185
Last Modified By: 5185

Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni- 413 736



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

VIKHE NIKITA RAM

2/2019

State Common Entrance Test Cell, Maharashtra State, Mumbai

104

State Common Entrance Test Cell, Maharashtra State, Mumbai
8th Floor, New Education Building, A.C. Nayak Marg, P. U. Loni-431001, (M.S.)
Receipt-cum-Acknowledgment of Seat Acceptance of CAP Round - III for Admission to First Year Of Two Year Full Time Post-Graduate
Course in Pharmacy (M. Pharmacist / Pharm. D. (Post Baccalaureate)) for the year 2019 - 2020

Application ID : MPH19201357

Version No 1.1

Personal Details

Full Name NIKITA KUMAR	Date of Birth 01-05-2007
Gender Female	Person with Disability N/A
Annual Family Income (₹) 11,000 - 20,000	Category for Admission ARC - Kuntal
Category ARC - Kuntal	Religious Minority N/A
Language Minority N/A	Orphan N/A
EWS N/A	SC Aggregate 83.88 %
Qualifying Exam SSC	BC Aggregate 88.31 %
Qualifying Exam HSC	Reserve Aggregate N/A
Qualifying Exam Bachel (Honours)	

CPAT Examination Details

Roll No 0801200135	Score 62
--------------------	----------

Provisional Allotment Details for CAP Round - III

Institute Allotted	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Course Allotted	Pharmaceutical Chemistry
Division Code Allotted	10401018
Seat Type Allotted	GEN
Seat Acceptance Fee Details	Prof Fee Allotted 0
Payment Status Successful	Paid Amount ₹ 1000/-
Remarks	

Seat Acceptance Details

Seat Acceptance Status	Freeze
Seat Acceptance Confirmation Details	Confirmed
Date 10-06-2019	
Place:	

Signature of Candidate
(NIKITA KUMAR)

Signature of ARC Officer (ARC5012)
Confirmed By: ARC5012
Printed By: ARC5012
Last Modified By: ARC5012

Seal of ARC5012

Seal of Pravara Rural College of Pharmacy, Loni

Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni- 431736

Declaration : We hereby declare that, we are reporting this Candidate to our ARC for M. Pharmacist 2019 - 2020 on notification of Candidate's Identity. The Candidate has paid the Fee mentioned in the receipt. We also declare that the seat acceptance form of Candidate is confirmed in presence of the Candidate.

ARC Use Only

Confirmed On 10-06-2019 03:10:30 PM
Printed On 10-06-2019 03:10:30 PM
Last Modified On 10-06-2019 03:10:30 PM
URL: <http://www.mahacet.org.in/txt2019/mpharm19/index.php/arc/confirm/seatacceptance/10401018/0801200135>
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PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

WARKHAD RUSHIKESH SHANKAR

State Common Entrance Test Cell, Maharashtra State, Mumbai

State Emblem of India

State Common Entrance Test Cell, Maharashtra State, Mumbai
8th Floor, New Excelior Building, A.K. Nayak Marg, Fort, Mumbai-400001 (M.S.)
Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of Two Year
Full Time Post-Graduate Course In Pharmacy (M. Pharmacy / Pharm. D. (Post Baccalaureate)
) for the year 2019 - 2020

Application ID : MPH19202593

Mode of Admission : Non Sponsored

Personal Details

Full Name: WARKHAD RUSHIKESH SHANKAR
Nationality: Indian
Gender: Male
Date of Birth: 12-08-1997
Annual Family Income: 59,901 - 1,00,000 (₹)
Category-Caste: OBC - Kulkarni
Religious Minority / Linguistic Minority: N/A
PWD Type: N/A
Type of Candidature: Maharashtra State Candidate - Type A

Allotment Details

All India Merit Number: 1945
Allotted Choice Code: 519481710
Allotted Seat Type: 006C
Preference No.: 2

Reporting Details

Institute: Amrutvahini College of Pharmacy, Sangamner
Tuition Fees (₹): 0/-
Development Fees (₹): 315/-
Other Fees (₹): 0/-
Total Fees (₹): 315/-
Course: 519481710-Pharmacology
Admission Date: 02-08-2019
Admission Type: CAP Round

Declaration by Candidate: I hereby agree to conform to rules, acts and laws made at the Government. I hereby undertake that no king as I am student of College of India, I will not behave in a manner which may result in compromising the authorities to take disciplinary action against me. I fully understand that the Amrutvahini College of Pharmacy is an institute established under the Maharashtra State Government and the authorities of the Government.

Date: 02-08-2019

Place: _____

Signature of The Candidate
(WARKHAD RUSHIKESH SHANKAR)

INSTITUTE USE ONLY

Declaration by the College/Institute: We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharmacy / Pharm. D. (Post Baccalaureate)) for the year 2019 - 2020 on verification of Candidate's identity. The candidate has paid the fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed on receipt of the Candidate.

Seal of Amrutvahini College of Pharmacy, Sangamner

Reported On: 02-08-2019 04:17:43 PM
Printed On: 02-08-2019 04:17:43 PM
Last Modified On: 02-08-2019 04:17:43 PM

Signature of Institute Officer (5194)

Reported By: 5194
Printed By: 5194
Last Modified By: 5194

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<https://admission30c2/19/mahacet.org/in/cet0150/qna/19/index.php/institute/reporting/Details/admission/Receipt/5194/AndH/Mgmt>

Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736



PRAVARA RURAL EDUCATION SOCIETY'S
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OF PHARMACY
LONI

SABALE SAGAR KAILAS

State Common Entrance Test Cell, Maharashtra State, Mumbai
30th Floor, New Excelior Building, A.K. Nayak Marg, Fort, Mumbai-400001.(M.S.)
Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharmacy / Pharm. D. (Post Baccalaureate)) for the year 2019 - 2020
Application ID : NPW19203411
Mode of Admission : Non Sponsored

Personal Details
Full Name (SABALE SAGAR KAILAS)
Nationality Indian
Date of Birth 09-05-1992
Category Casta OBC -A/UR/SC
Religious Minority/Lingualite U.S.
Minority
P.W.D Type N.A.
Type of Candidature Maharashtra State Candidate / Other A

Gender Male
Annual Family Income (₹) 15,000 - 50,000

Admission Details
All India Merit Number 1201
Allotted Choice Code 00000002
Allotted Seat Type 000C
Preference No. 1

Reporting Details
Institute Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Tuition Fee (₹) 3000/-
Development Fee (₹) 10000/-
Other Fees (₹) 0/-
Total Fees (₹) 13300/-
Source 12000100-Pharmaprosess
Admission Date 20-07-2019
Admission Type CAP Round

Declaration by Candidate : I hereby agree to conform to rules, which are framed by Government. I hereby undertake that as long as I am student of this college, I will not engage in a manner which may result in contempt of the authority to take disciplinary action against me. I also undertake that the Principal/Institute of this college/Institution will have the right to admit, matriculate the student, to study, to be eligible for admission to the college/Institution and to withdraw from the college/Institution at any time.
Date: 22-07-2019
Place: L. C.T.

Signature of the Candidate
SABALE SAGAR KAILAS

INSTITUTE USE ONLY
Declaration by the College/Institute : We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course in Pharmacy (M. Pharmacy / Pharm. D. (Post Baccalaureate)) for the year 2019 - 2020 on verification of Candidate's identity. The candidate has signed a declaration in this regard. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Reported On: 22-07-2019 11:13:04 AM
Printed On: 22-07-2019 11:13:04 AM
Last Modified On: 22-07-2019 11:13:04 AM
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Signature of Institute Officer (S145)
Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736

Signature of Candidate
Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

GORE PRATIKSHA SANTOSH

 **Rajiv Gandhi University of Health Sciences, Karnataka**
4th 'T' Block Jayanagar, Bengaluru-560041, India.

HALL TICKET
JANUARY-2020 EXAMINATION

Course : M. PHARM [INDUSTRIAL PHARMACY] SEMESTER-I
Name of The College : P501-H K E SOCIETY COLLEGE OF PHARMACY, GULBARGA.
Register No. : 19P1016
Student Name : GORE PRATIKSHA SANTOSH
Nationality : Indian



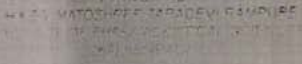
Subject Appearing				
Sl No	Subjects	QP Code	Answer Booklet ID	Invigilator Sign
1	MODERN PHARMACEUTICAL ANALYTICAL TECHNIQUES-TTP	5101		
2	PHARMACEUTICAL FORMULATION DEVELOPMENT-TTP	5109	A13 62970	
3	CUSTOMIZED DRUG DELIVERY SYSTEM-TTP	5110		
4	DRUG REGULATIONS AND INTELLECTUAL PROPERTY RIGHTS-TTP	5111		
5	INDUSTRIAL PHARMACY PRACTICAL-I-PPR			
6	MODERN PHARMACEUTICAL ANALYTICAL PRACTICAL-PPR			

Note: 1. Candidate is advised to check the QP code before answering.
2. Supervisor should verify the QP code before signing.
3. Before answering, please read the instruction given in the Answer Booklet.

Signature of Student: Pratiksha

Date: _____

I certify that this candidate is eligible to appear for the current examination as per the details mentioned above

Signature of the Principal with seal:

Principal

Chief Superintendent
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni- 413 736

Registrar (Evaluation)

PHARM.D. PHARM.D. PHARM.D. PHARM.D. PHARM.D.
E.S. Matoshree Taradevi Ramgare
Institute of Pharmacy, Loni, Solapur



**PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI**

KASABE AKSHAY SAKHARAM

State Common Entrance Test Cell, Maharashtra State, Mumbai
8th Floor, New Excelior Building, A.K. Nayak Marg, Fort, Mumbai-400001. (H.S.)
Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of Two Year
Full Time Post-Graduate Course In Pharmacy (M. Pharmacy / Pharm. D. (Post Baccalaureate))
for the year 2019 - 2020

Application ID : MPH19201409

Mode of Admission : Non Sponsored

Personal Details

Full Name: KASABE AKSHAY SAKHARAM

Nationality: Indian

Gender: Male

Date of Birth: 26-01-1997

Annual Family Income (₹): 4,00,000 - 4,50,000

Category: Caste NT 2 (NT-C) - Other

Religious Minority/Linguistic Minority: N/A

PWD Type: N/A

Type of Candidature: Maharashtra State Candidate - Type A

Allotment Details

All India Merit Number 2019

Allotted Choice Code 51852210

Allotted Seat Type GNTC

Preference No. 2

Reporting Details

Institute: Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar

Tuition Fees (₹) 0/-

Development Fees (₹) 1000/-

Other Fees (₹) 0/-

Total Fees (₹) 1000/-

Remark: Confirmed

Declaration by Candidate: I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that as long as I am student of College/Institute, I will not become in a manner which may result in opposing the authorities to take disciplinary action against me. I also undertake that the Principal/Director of the Institution/College will have rights to expel, suspend and remove from the institution, for any infringement of the rules prescribed by the college/institute/university/department with the understanding given above.

Date: 02-08-2019

Place:

Signature of The Candidate (KASABE AKSHAY SAKHARAM)

INSTITUTE USE ONLY

Declaration by the College/Institute: We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharmacy / Pharm. D. (Post Baccalaureate)) for the year 2019 - 2020 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar

Reported On: 02-08-2019 01:31:01 PM

Printed On: 02-08-2019 01:31:09 PM

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Signature of Institute Officer (5185)

Principal

Pravara Rural College of Pharmacy, Pravaranagar, A/p. Loni-413736

Printed By: 5185

Last Modified By: 5185

Principal

Pravara Rural College of Pharmacy, Pravaranagar, A/p. Loni-413736

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PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

NIRMAL TEJAL SUNIL

7/22/2019

State Common Entrance Test Cell, Maharashtra State, Mumbai

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State Common Entrance Test Cell, Maharashtra State, Mumbai
8th Floor, New Excelsior Building, A.K. Nayak Marg, Fort, Mumbai-400001.(M.S.)
Receipt-cum-Acknowledgement of Seat Acceptance of CAP Round - I for Admission to First Year
Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharmacy / Pharm. D. (Post
Baccalaureate)) for the year 2019 - 2020

Application ID :
MPH19201278

Version No : 1

Personal Details

Full Name: NIRMAL TEJAL SUNIL

Gender: Female

Date of Birth: 05-02-1997

Annual Family Income (₹): 15,001 - 50,000

Person with Disability: N.A.

Category: OBC - Kunabi

Category for Admission: OBC - Kunabi

Linguistic Minority: N.A.

Religious Minority: N.A.

EWS: N.A.

Orphan: N.A.

Qualifying Exam: SSC

SSC Aggregate: 82.18 %

Qualifying Exam: HSC

HSC Aggregate: 66.92 %

Qualifying Exam: Bpharm (Appearing)

Bpharm Aggregate: N.A.

GPAT Examination Details

Roll No: MR01200005

Score: 108

Provisional Allotment Details for CAP Round - I

Institute Allotted: S185-Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar

Course Allotted: Quality Assurance Techniques

Choice Code Allotted: S18512810

Seat Type Allotted: GOVERN

Seat Acceptance Fee Details

Payment Status: Successful

Paid Amount (₹): ₹ 1000/-

Remark:

Seat Acceptance Status: Freeze

Seat Acceptance Confirmation Details: Confirmed

Date: 22-07-2019

Place:

Signature of Candidate
(Nirmal Tej) (NIRMAL TEJAL SUNIL)

ARC Use Only

Declaration: We hereby declare that, we are reporting this Candidate to our ARC for M - Pharmacy 2019 - 2020 on verification of Candidate's Identity. The Candidate has paid the Fees mentioned in this receipt. We also declare that the seat acceptance form of Candidate is confirmed in presence of the Candidate.

Seal of ARC5012

Signature of ARC Officer (ARC5012)

Confirmed By: ARC5012

Printed By: ARC5012

Last Modified By: ARC5012

Confirmed On: 22-07-2019 10:17:12 AM

Printed On: 22-07-2019 10:17:14 AM

Last Modified On: 22-07-2019 10:17:12 AM

URL: <http://admission3cet2019.mahacet.org.in/cet2019/mpfarm19/index.php/ArcController/admitReceipt?Id=MJAxMjc4&rnd=MQ==>

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Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni- 413 736



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

ALHAT SONALI DILIP

State Common Entrance Test Cell, Maharashtra State, Mumbai 8th Floor, New Excelior Building, A.K.Nayak Marg, Fort, Mumbai-400001.(M.S.) Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019	
Application ID : MPH18103790	Mode of Admission : Non Sponsored
Personal Details	
Full Name: ALHAT SONALI DILIP	Gender: Female
Nationality: Indian	Annual Family Income (₹): 15,001 - 50,000
Date of Birth: 24-05-1997	Category-Caste: SC -Mang
Religious: N/A	Minority/Linguistic Minority: N/A
PWD Type: N/A	Type of Candidature: Maharashtra State Candidate - Type A
Admission Details	
All India Merit Number: 1625	Alotted Choice Code: 510551910
Alotted Seat Type: GSC	Preference No.: 1
Reporting Details	
Institute: Pravara Rural Education Society's Pravara Rural College of Pharmacy,Pravararanagar	Course: 510551910-Pharmacognosy
Tuition Fees (₹): 0/-	Admission Date: 16-08-2018
Development Fees (₹): 0/-	Admission Type: CAP Round 1
Other Fees (₹): 0/-	Total Fees (₹): 0/-
Remark: confirmed	
Declaration by Candidate: I hereby agree to conform to rules, acts and fees enforced by Government. I hereby undertake that as long as I am student of College/Institute, I will not behave in a manner which may result in comprising the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the college/institute will have rights to expel, radiate me from the Institute, for any infringement of the rules prescribed by the college/institute/university/Government and the following point above.	
Date: 16-08-2018	Signature of The Candidate: ALHAT SONALI DILIP
Place:	
INSTITUTE USE ONLY	
Declaration by the College/Institute: We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.	
Seal of Pravara Rural Education Society's Pravara Rural College of Pharmacy,Pravararanagar	Signature of Institute Officer (51055)
Reported On: 16-08-2018 02:04:25 PM	Pravara Rural Reported By: 51055
Printed On: 16-08-2018 02:04:33 PM	Pravara Rural Printed By: 51055
Last Modified On: 16-08-2018 02:04:26 PM	Last Modified By: 51055

Priya
Principal
Pravara Rural College of Pharmacy
Pravararanagar, A/p. Loni-413736



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

BHANGRE SHRADDHA JAYANT

State Common Entrance Test Cell, Maharashtra State, Mumbai
6th Floor, New Excelior Building, A.K.Nayak Marg, Fort, Mumbai-400001 (M.S.)
Receipt-cum-Acknowledgement of Seat Acceptance of CAP Round - I for Admission to First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019

Application ID : MPH18103451 Version No : 1

Personal Details

Full Name	BHANGRE SHRADDHA JAYANT		
Nationality	Indian	Gender	Female
Date of Birth	29-12-1995	Annual Family Income (₹)	4,00,001 - 4,50,000
Category	ST - Kell Mahadev	Category for Admission	ST - Kell Mahadev
Lingualistic Minority	N.A.	Religious Minority	N.A.
Person with Disability	N.A.		
Qualifying Exam	SSC	SSC Aggregate	75.60 %
Qualifying Exam	HSC	HSC Aggregate	51.35 %
Qualifying Exam	Bopharm (Appearing)	Bopharm Aggregate	64.45 %

GPAT Examination Details

Roll No	2401046119	Score	49
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Provisional Allotment Details for CAP Round - I

Institute Allotted	S185-Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Course Allotted	Quality Assurance Techniques
Choice Code Allotted	S18512810
Seat Type Allotted	GST
Prefer No Allotted	1

Seat Acceptance Fee Details

Payment Status	Successful	Paid Amount (₹)	₹ 1000/-
Remark			

Seat Acceptance Details

Seat Acceptance Status	Freeze
Seat Acceptance Confirmation Details	Confirmed

Date: 30-07-2018
Place :

ARC Use Only

Declaration : We hereby declare that, we are reporting this Candidate to our ARC for M - Pharmacy 2018 - 2019 on verification of Candidate's Identity. The Candidate has paid the Fees mentioned in this receipt. We also declare that the seat acceptance form of Candidate is confirmed in presence of the Candidate.

Confirmed On: 30-07-2018 04:59:16 PM
Printed On: 30-07-2018 04:59:16 PM
Last Modified On: 30-07-2018 04:59:16 PM
URL: http://mpharm18.dtemaharashtra.org/mpharm18/rc_reports.php/rc_reporting/admitreceipt?id=MTA5NDUx&rnd=MQ==

Seal of ARCS012

Signature of Candidate (BHANGRE SHRADDHA JAYANT)

Signature of ARC Officer (ARCS012)
Confirmed By: ARCS012
Printed By: ARCS012
Last Modified By: ARCS012

PRAVARA RURAL COLLEGE OF PHARMACY
ARC 5012

Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

CHINCHORE GAURAV SHANKAR

State Common Entrance Test Cell, Maharashtra State, Mumbai 8th Floor, New Excelior Building, A.K.Nayak Marg, Fort, Mumbai-400001 (M.S.) Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019	
Application ID : MPH18102526	Made of Admission : Non Sponsored
Personal Details	
Full Name	CHINCHORE GAURAV SHANKAR
Nationality	Indian
Date of Birth	21-07-1996
Gender	Male
Category-Caste	OBC -Ward
Annual Family Income (₹)	30,001 - 1,00,000
Religious	N.A.
Minority/Lingualic Minority	N.A.
PWD Type	N.A.
Type of Candidature	Maharashtra State Candidate - Type A
Admission Details	
All India Merit Number : 1826	
Reporting Details	
Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Tuition Fees (₹)	0/-
Development Fees (₹)	0/-
Other Fees (₹)	0/-
Total Fees (₹)	0/-
Course	518512610-Quality Assurance Techniques
Admission Date	18-08-2018
Admission Type	CAP Round 1
Remark	confirmed
Declaration by Candidate : I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/Institute, I will not behave in a manner which may result in bringing the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the Institute/College will have rights to expel, suspend me from the Institute, for any transgression of the rules prescribed by the college/institute/university Government and the Maharashtra 2018 Rules.	
Date: 18-08-2018	Signature of The Candidate (CHINCHORE GAURAV SHANKAR)
Place :	
INSTITUTE USE ONLY	
Declaration by the College/Institute : We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.	
Seal of Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar	Signature of Institute Officer (5185)
Reported On: 18-08-2018 01:30:13 PM	Reported By: 5185
Printed On: 18-08-2018 01:30:22 PM	Printed By: 5185
Last Modified On: 18-08-2018 01:30:13 PM	Modified By: 5185
Principal Pravara Rural College of Pharmacy Pravaranagar, A/p. Loni-413736	



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

DARADE PRIYANKA SOMNATH

State Common Entrance Test Cell, Maharashtra State, Mumbai
4th Floor, New Faber Building, A.K. Nayak Marg, Fort, Mumbai - 400004 (M.S.)
Receipt With Acknowledgment of Institute Reporting for Admission for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (B. Pharm.) for the year 2018 - 2019

Application ID : MPH18103857

Mode of Admission : Non Sponsored

Personal Details

Full Name : DARADE PRIYANKA SOMNATH

Nationality : Indian

Gender : Female

Date of Birth : 01-04-1998

Annual Family Income : (₹) 15,00,000 - 18,00,000

Category : ST (B.C.P.S.) - VETN

Religious Minority / Linguistic Minority : N/A

PWD Type : N/A

Type of Candidature : Maharashtra State Candidate - Type A

Reporting Details

Institute : Amrutvahini College of Pharmacy, Sangamner

Tuition Fees (₹) : 12000/-

Development Fees (₹) : 0/-

Other Fees (₹) : 0/-

Total Fees (₹) : 12000/-

Course : B.Pharm (1st Year)

Admission Date : 17-08-2018

Admission Type : CAR Round 1

Remarks

Declaration by Candidate : I hereby declare that I am a candidate of the Maharashtra State Common Entrance Test Cell, Mumbai, for the year 2018 - 2019. I have paid the fees mentioned in this receipt. I have also declared that the admission of Candidate is confirmed in principle at the College.

Date : 17-08-2018

Place : Sangamner

Signature of The Candidate : DARADE PRIYANKA SOMNATH

Declaration by the College/Institute : I hereby declare that I am reporting this Candidate for admission to the College/Institute for the year 2018 - 2019 on verification of Candidate's details. The Candidate has paid the fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in principle at the College.

Seal of Amrutvahini College of Pharmacy, Sangamner

Signature of Institute Officer (5194)

Reported On : 17-08-2018 04:43:43 PM

Printed On : 17-08-2018 04:46:02 PM

Last Modified On : 17-08-2018 04:45:45 PM

Reported By : 5194

Printed By : 5194

Last Modified By : 5194

Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni- 413 738



PRAVARA RURAL EDUCATION SOCIETY'S

PRAVARA RURAL COLLEGE
OF PHARMACY

LONI

DEOKAR ANUJA UDDHAV

State Common Entrance Test Cell, Maharashtra State, Mumbai
8th Floor, New Excelsior Building, A.K.Nayak Marg, Fort, Mumbai-400001.(M.S.)
Receipt-cum-Acknowledgement of Institute Level Admission as Institute Level Seat for Admission to First Year Of
Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019

Application ID : MPH18100588 Sponsorship Status : Non Sponsored

Personal Details :

Full Name	DEOKAR ANUJA UDDHAV		
Nationality	Indian	Date of Birth	12-09-1995
Gender	Female	Annual Family Income (₹)	50,001 - 1,00,000
Category-Caste	OPEN	Applied For EBC	No
PH Type	N.A.		
Type of Candidature	Maharashtra State Candidate - Type A		

B-Pharmacy Status : Passed B-Pharmacy University : Savitribai Phule Pune University

Qualification Details:

Examination	Marks Obtained	Out of	Percentage
B.Pharmacy Final Year/Semester	3245	4800	67.6
12th/H.S.C. Aggregate	454	650	69.85
10th/S.S.C. Aggregate	460	550	83.64

Institute Details :

Institute Name	5185 - Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar (Un-Aided - Non-Autonomous - Non-Minority)		
Tuition Fees (₹)	5000/-	Course Name	518512610-Quality Assurance Techniques
Development Fees (₹)	2000/-	Admission Date	30-08-2018
Other Fees (₹)	0/-	Admission Type	Institute Level Seat
Total Fees (₹)	7000/-	Remark	Confirmed

Declaration by Candidate : I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the institute/college will have rights to expel, rusticate me from the institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

Date:30-08-2018

Place :

Signature of The Candidate
(DEOKAR ANUJA UDDHAV)

INSTITUTE USE ONLY

Declaration by the College/Institute : We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018-2019 on verification of Candidate's Identity. This candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar

Reported On:30-08-2018 10:22:08 AM
Printed On : 30-08-2018 10:22:09 AM
Last Modified On :30-08-2018 10:22:09 AM

Signature of Institute Officer (5185)

Reported By:5185
Printed By:5185
Last Modified By:5185
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736

Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni- 413 736



PRAVARA RURAL EDUCATION SOCIETY'S

PRAVARA RURAL COLLEGE
OF PHARMACY

LONI

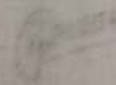
DHAVANE SHWETA SHAMRAO



Dr. Vithalrao Vikhe Patil Foundations
College of Pharmacy
Vilad Ghat
Ahmednagar 0241-2778044

Name : DHAVANE SHWETA S.
DOB : 08/08/1996 Blood Gr. : A+
Dept. : M.PHARM
Desig. : STUDENT
Add : AT POST LONI, TAL. RAHATA
DIST. A. NAGAR
LONI
Phone : 8421583165




Principal
2018COL11




Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/o. Loni-431336



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

DIGHE YOGITA PANDURANG

State Common Entrance Test Cell, Maharashtra State, Mumbai
8th Floor, New Excelior Building, A.K.Nayak Marg, Fort, Mumbai-400001.(M.S.)
Receipt-cum-Acknowledgement of Seat Acceptance of CAP Round - 1 for Admission to First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019

Application ID : MPH18102969 Version No : 1

Personal Details

Full Name	DIGHE YOGITA PANDURANG		
Nationality	Indian	Gender	Female
Date of Birth	19-01-1997	Annual Family Income (₹)	15,001 - 50,000
Category	OPEN	Category for Admission	OPEN
Lingualtic Minority	N.A.	Religious Minority	N.A.
Person with Disability	N.A.		
Qualifying Exam	SSC	SSC Aggregate	86.18 %
Qualifying Exam	HSC	HSC Aggregate	69.54 %
Qualifying Exam	Bpharm (Appearing)	Bpharm Aggregate	70.96 %

GPAT Examination Details

Roll No	2161020636	Score	107
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Provisional Allotment Details for CAP Round - I

Institute Allotted	S185-Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar		
Course Allotted	Quality Assurance Techniques		
Choice Code Allotted	S18512610		
Seat Type Allotted	GOPEN		
Pref No Allotted	1		

Seat Acceptance Fee Details

Payment Status	Successful	Paid Amount (₹)	₹ 1000/-
Remark			

Seat Acceptance Details

Seat Acceptance Status:	Freeze
Seat Acceptance Confirmation Details:	Confirmed

Date: 31-07-2018

Place :

ARC Use Only

Declaration : We hereby declare that, we are reporting this Candidate to our ARC for M - Pharmacy 2018 - 2019 on verification of Candidate's Identity. The Candidate has paid the Fees mentioned in this receipt. We also declare that the seat acceptance form of Candidate is confirmed in presence of the Candidate.

Confirmed On: 31-07-2018 10:40:08 AM
Printed On: 31-07-2018 10:40:13 AM
Last Modified On: 31-07-2018 10:40:08 AM
URL: http://mpharm18.dtemaharashtra.org/mpharm18/rc_reports.php/rc_reporting/admitreceipt?id=MTAyODYw&rnd=MQ==

Seal of ARC5012

Signature of Candidate
(DIGHE YOGITA PANDURANG)

Signature of ARC Officer (ARC5012)
Confirmed By: ARC5012
Printed By: ARC5012
Last Modified By: ARC5012

ARC 5012

Principal
Pravara Rural College of Pharmacy
Pravaranagar, A.P. Loni - 431736



GAIKWAD NIKITA RAMAKANT

State Common Entrance Test Cell, Maharashtra State, Mumbai
8th Floor, New Exceler Building, A.K.Nayak Marg, Fort, Mumbai-400001 (M.S.)
Receipt-cum-Acknowledgement for Admission to First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019

Application ID : MPH16103747	Application Fee : ₹ 600	Version : 4																				
GPAT Score : 59	GPAT Details																					
Personal Details :		GPAT Rank : 18709																				
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">GAIKWAD NIKITA RAMAKANT</td> </tr> <tr> <td>Indian</td> <td></td> </tr> <tr> <td>Female</td> <td>Date of Birth : 24/10/1995</td> </tr> <tr> <td>OBC - Mail [182]</td> <td>Religion : Hindu</td> </tr> <tr> <td>Marathi</td> <td>Annual Family Income (in ₹) : 15,001 - 50,000</td> </tr> <tr> <td>N.A.</td> <td></td> </tr> <tr> <td colspan="2">Maharashtra State Candidate - Type Maharashtra State Candidate - Type A</td> </tr> <tr> <td colspan="2">Maharashtra : N.A.</td> </tr> <tr> <td colspan="2">Mandatory/Linguistic Minority : N.A.</td> </tr> <tr> <td colspan="2">554650886316</td> </tr> </table>			GAIKWAD NIKITA RAMAKANT		Indian		Female	Date of Birth : 24/10/1995	OBC - Mail [182]	Religion : Hindu	Marathi	Annual Family Income (in ₹) : 15,001 - 50,000	N.A.		Maharashtra State Candidate - Type Maharashtra State Candidate - Type A		Maharashtra : N.A.		Mandatory/Linguistic Minority : N.A.		554650886316	
GAIKWAD NIKITA RAMAKANT																						
Indian																						
Female	Date of Birth : 24/10/1995																					
OBC - Mail [182]	Religion : Hindu																					
Marathi	Annual Family Income (in ₹) : 15,001 - 50,000																					
N.A.																						
Maharashtra State Candidate - Type Maharashtra State Candidate - Type A																						
Maharashtra : N.A.																						
Mandatory/Linguistic Minority : N.A.																						
554650886316																						
I, GAIKWAD NIKITA RAMAKANT (Candidate), hereby give my consent to State CET Cell to obtain my Aadhar number for authentication with UIN and to use my Aadhar number for admission purpose and will be submitted to CEEB only for the purpose of authentication.																						
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">Payment Details</td> </tr> <tr> <td>Successful</td> <td>Paid Amount (Rs.) 600</td> </tr> </table>			Payment Details		Successful	Paid Amount (Rs.) 600																
Payment Details																						
Successful	Paid Amount (Rs.) 600																					
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">B. Pharmacy Details</td> </tr> <tr> <td>Passed</td> <td>B. Pharmacy University Savitribai Phule Pune University</td> </tr> </table>			B. Pharmacy Details		Passed	B. Pharmacy University Savitribai Phule Pune University																
B. Pharmacy Details																						
Passed	B. Pharmacy University Savitribai Phule Pune University																					
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3">Qualification Details:</td> </tr> <tr> <td>Marks Obtained</td> <td>Out of</td> <td>Percentage</td> </tr> <tr> <td>3244</td> <td>4800</td> <td>67.50</td> </tr> <tr> <td>468</td> <td>550</td> <td>84.91</td> </tr> <tr> <td>253</td> <td>450</td> <td>56.22</td> </tr> </table>			Qualification Details:			Marks Obtained	Out of	Percentage	3244	4800	67.50	468	550	84.91	253	450	56.22					
Qualification Details:																						
Marks Obtained	Out of	Percentage																				
3244	4800	67.50																				
468	550	84.91																				
253	450	56.22																				
List of Submitted Documents at the time of verification at PC: Statement of marks obtained at 12th/HSC or its Equivalent Examination Statement of marks obtained at 12th/HSC or its Equivalent Examination Original Leaving Certificate after passing Qualifying Examination Certificate of the Indian Reservation of the candidate Caste Certificate stating that the caste is recognised under backward class category in Maharashtra Caste / Tribe / Vaidya Certificate issued by Caste / Tribe Certificate Security Commission Caste / Tribe / Vaidya Certificate issued by Caste / Tribe Certificate Security Commission Non-Creamy Layer Certificate valid upto 31/03/2019 The dated Leaving Certificate indicating the Place Of Birth in Maharashtra Valid GPAT Score card B. Pharm. Degree Marksheet																						
Declaration I, GAIKWAD NIKITA RAMAKANT (Candidate), have filled this Application Form for consideration of submission of Application Form at PC. I am aware that the information given in this Application Form is true to the best of my knowledge & belief. If at any stage, it is found that I have furnished wrong information and/or false information and/or false information, I will be liable to be debarred from admission to the course and I will be subject to legal and/or penal action as per the provisions of the law.																						
Signature of the Candidate (GAIKWAD NIKITA RAMAKANT)																						
Printed By: PCS185																						
Confirmed By: PCS185																						
Printed On: 25-07-2018 02:51:25 PM																						
Confirmed On: 25-07-2018 02:14:37 PM																						
FC USE ONLY																						
Seal of PCS185																						
Signature of PCS185																						
Principal																						
Pravara Rural College of Pharmacy, Pravaranagar																						
FC-5185																						
Last modified by: PCS185																						
Printed on: 25-07-2018																						



GAIKWAD SHAMAL SANJAY

[illegible]



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

GHOLAP PRIYANKA DILIP

State Common Entrance Test Cell, Maharashtra State, Mumbai
8th Floor, New Excelstor Building, A.K.Nayak Marg, Fort, Mumbai-400001 (M.S.)
Acknowledgement of Seat Acceptance Status Form of First Year Of Two Year Full Time Post-Graduate Course in Pharm.
Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019

Version No: 1

Full Name	GHOLAP PRIYANKA DILIP	Gender	Female
Nationality	Indian	Annual Family Income (₹)	15,000 - 55,000
Date of Birth	04-06-1997	Category for Admission	OBC - Kunabi
Category	OBC - Kunabi	Religious Minority	N.A.
Religious Minority	N.A.	SSC Aggregate	80.91 %
SSC Aggregate	N.A.	HSC Aggregate	60.00 %
SSC		Bpharm Aggregate	72.83%
HSC			
Bpharm (Appearing)			

Roll No 2251022477 Score 55

Provisional Allotment Details for CAP Round - I

5105-Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar	
Pharmacognosy	
510581910	Seat No Allotted 1
GOBC	

Seat Acceptance Fee Details

Payment Status	Successful	Paid Amount (₹)	₹ 1000/-
Remark			

Seat Acceptance Details

Freeze	
Confirmed	

Signature of Candidate
(GHOLAP PRIYANKA DILIP)

Signature of ARC Officer (ARCS012)
Confirmed By: ARCS012
Printed By: ARCS012
Last Modified By: ARCS012

Seal of ARCS012

Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

GHOLAP SHUBHAM VASANT

State Common Entrance Test Cell, Maharashtra State, Mumbai
8th Floor, New Excelsior Building, A.K.Nayak Marg, Fort, Mumbai-400001.(M.S.)
Receipt-cum-Acknowledgement of Institute Level Admission as Institute Level Seat for Admission to First Year Of
Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019

Application ID : MPH18100560 Sponsorship Status : Non Sponsored

Personal Details :

Full Name	GHOLAP SHUBHAM VASANT		
Nationality	Indian	Date of Birth	14-07-1996
Gender	Male	Annual Family Income (₹)	15,001 - 50,000
Category-Caste	OPEN		
Applied For EBC	No		
PH Type	N.A.		
Type of Candidature	Maharashtra State Candidate - Type Maharashtra State Candidate - Type A		

B-Pharmacy Status Passed **B-Pharmacy University** Savitribai Phule Pune University

Qualification Details:

Examination	Marks Obtained	Out of	Percentage
B.Pharmacy Final Year/Semester	2935	4800	61.15
12th/H.S.C. Aggregate	297	600	49.5
10th/S.S.C. Aggregate	314	550	57.09

Institute Details :

Institute Name	5185 - Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar (Un-Aided - Non-Autonomous - Non-Minority)		
Tuition Fees (₹)	5000/-	Course Name	518512610-Quality Assurance Techniques
Development Fees (₹)	2000/-	Admission Date	30-08-2018
Other Fees (₹)	0/-	Admission Type	Institute Level Seat
Total Fees (₹)	7000/-	Remark	Confirmed

Declaration by Candidate : I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the institute/college will have rights to expel, rusticate me from the institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

Date: 30-08-2018

Place :

Signature of The Candidate
(GHOLAP SHUBHAM VASANT)

INSTITUTE USE ONLY

Declaration by the College/Institute : We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018-2019 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar

Reported On: 30-08-2018 10:22:50 AM
Printed On : 30-08-2018 10:22:52 AM
Last Modified On : 30-08-2018 10:22:50 AM

Signature of Institute Officer (5185)

Principal
Reported By: 5185
Pravara Rural Coll: Printed By: 5185
Pravaranagar, A/p. Loni-413736
Last Modified By: 5185

Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni- 413 736



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

GHULE HANUMANT ARJUN

State Common Entrance Test Cell, Maharashtra State, Mumbai 8th Floor, New Excelior Building, A.K.Nayak Marg, Fort, Mumbai-400001.(M.S.) Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019			
Application ID : MPH18103184		Mode of Admission : Non Sponsored	
Personal Details			
Full Name	GHULE HANUMANT ARJUN		
Nationality	Indian	Gender	Male
Date of Birth	11-06-1994	Annual Family Income (₹)	15,001 - 50,000
Category-Caste	NT 3 (NT-D) -Vanjari		
Religious	N.A.		
Minority/Linguistic Minority	N.A.		
PWD Type	N.A.		
Type of Candidature	Maharashtra State Candidate - Type A		
Allotment Details			
All India Merit Number	569		
Allotted Choice Code	518512610		
Allotted Seat Type	GOPEN		
Preference No.	1		
Reporting Details			
Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar		
Tuition Fees (₹)	0/-	Course	518512610-Quality Assurance Techniques
Development Fees (₹)	3190/-	Admission Date	01-08-2018
Other Fees (₹)	0/-	Admission Type	CAP Round 1
Total Fees (₹)	3190/-		
Remark	confirmed		
Declaration by Candidate : I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the Institute/College will have rights to expel, rusticate me from the Institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.			
Date: 01-08-2018	Signature of the Candidate (GHULE HANUMANT ARJUN)		
Place :			
INSTITUTE USE ONLY			
Declaration by the College/Institute : We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.			
Seal of Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar		Signature of Institute Officer (5185)	
Reported On: 01-08-2018 03:40:33 PM		Reported By: 5185	
Printed On: 01-08-2018 03:40:41 PM		Printed By: 5185	
Last Modified On: 01-08-2018 03:40:33 PM		Last Modified By: 5185	
		PRINCIPAL Pravara Rural College of Pharmacy Pravaranagar, A.P. Loni-413736	
		 Principal Pravara Rural College of Pharmacy Pravaranagar, A.P. Loni-413736	



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

KADAM VINAYA VAIBHAV

42

State Common Entrance Test Cell, Maharashtra State, Mumbai
8th Floor, New Excelcor Building, A.K. Naysik Marg, Fort, Mumbai-400001 (M.S.)
Receipt-cum-Acknowledgement of Seat Acceptance of CAP Round - I for Admission to First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019

Application ID : MPH18102291 Version No : 3

Personal Details

Full Name	KADAM VINAYA VAIBHAV	Gender	Female
Nationality	Indian	Annual Family Income (₹)	15,001 - 50,000
Date of Birth	04-04-1997	Category for Admission	SC - Mahar
Category	SC - Mahar	Religious Minority	N.A.
Linguistic Minority	N.A.	Person with Disability	N.A.
Qualifying Exam	DSC	SSC Aggregate	75.69 %
Qualifying Exam	HSC	HSC Aggregate	57.54 %
Qualifying Exam	Bachelor (Appointing)	Bachelor Aggregate	63.75 %

GPAT Examination Details

Roll No	2171021257	Score	36
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Provisional Allotment Details for CAP Round - I

Institute Allotted	1185-Pravara Rural Education Society's Pravara Rural College of Pharmacy Pravaranagar
Course Allotted	Pharmaceutical Chemistry
Choice Code Allotted	5185R2210
Seat Type Allotted	DSC
Pre No Allotted	2

Seat Acceptance Fee Details

Payment Status	Successful	Paid Amount (₹)	₹ 1000/-
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Seat Acceptance Details

Seat Acceptance Status	Freeze
Seat Acceptance Confirmation Details	Confirmed

Date: 09-07-2018

Place: _____

ARC Use Only

Declaration: We hereby declare that, we are reporting this Candidate to our ARC for M - Pharmacy 2018 - 2019 on verification of Candidate's Identity. The Candidate has paid the fees mentioned in this receipt. We also declare that the seat acceptance form of Candidate is confirmed in presence of the Candidate.

Seal of ARC5012

Signature of ARC Officer (ARC5012)

Confirmed By: ARC5012

Printed By: ARC5012

URL: http://mpharm18.dtemaharashtra.org/mpharm18/rc_reports.php/rc_reporting/admitreceiptId=MTA5MjIxMjU3&rnd=HQn

Confirmed On: 31-07-2018 10:00:37 AM
Printed On: 31-07-2018 10:01:02 AM
Last Modified On: 31-07-2018 10:00:37 AM

Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p, Loni-413736



PRAWARA RURAL EDUCATION SOCIETY'S
PRAWARA RURAL COLLEGE
OF PHARMACY
LONI

KARALE GEETANJALI VILAS

State Common Entrance Test Cell, Maharashtra State, Mumbai
8th floor, New Excelior Building, A.K. Nayak Marg, Fort, Mumbai-400001 (M.S.)
Acknowledgement for Admission to First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019

Application ID : MPHTS123500 Application Fee : ₹ 500 Version : 2

GPAT Details
GPAT Score : 144 GPAT Rank : 24359

Personal Details
Name : KARALE GEETANJALI VILAS
Date of Birth : 23/12/1996
Religion : Hindu
Annual Family Income (in ₹) : 15,000 - 50,000
Nationality : N.A.
Maharashtra State Candidate - Type : Maharashtra State Candidate - Type : A
Minority : N.A.

Payment Details
Successful : Yes
Paid Amount (in ₹) : 500

B. Pharmacy University : Pravara Rural Education Society's Pravara University
Qualification Details
Marks Obtained : 3175 Out of : 4000 Percentage : 79.38
421 Out of : 500 Percentage : 84.20
1597 Out of : 600 Percentage : 83.17

List of Submitted Documents at the time of verification at FC
Certificate of marks obtained at 10th/SSC or its Equivalent Examination
Certificate of marks obtained at 12th/HSC or its Equivalent Examination
Qualifying Certificate after passing Qualifying Examination in
State of the candidate's Nationality of the candidate
Certificate of the candidate indicating that he/she is Domiciled in the State of Maharashtra
Declaration stating that the caste is recognised under backward class category in Maharashtra
Maharashtra State Certificate valid upto 31st March 2019
GPAT Score card
National Higher Marksheet
National Submission of Caste/Tribal Validity Certificate

Declaration
I hereby declare that I have read the Application Form for consideration of Admission to Application Form at
Pravara Rural College of Pharmacy (M. Pharm.) for the Academic Year 2018 - 2019. The information
provided in the Application Form is true to the best of my knowledge & belief. If it is found that I have furnished wrong
information and/or submitted false certificate(s), I am aware that my admission status cancelled and I will be debarred. Further I will be subject
to action as per the provisions of the law.

Signature of the Candidate
KARALE GEETANJALI VILAS

Printed By: FC5185
Printed On: 2018/02/18 10:18:35 AM
Confirmed By: FC5185
FC USE ONLY
Signature of FC5185
FC-5185
Pravara Rural College of Pharmacy,
Pravaranagar
Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

KARWANJE PRATIK MANIKRAO

 **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 - III for Admission to First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019
Published On :13-08-2018 at 05:00 PM
Application ID :MPH18101049 GPAT Score: 104

Personal Details			
Full Name	KARWANJE PRATIK MANIKRAO		
Gender	Male	Date of Birth	08-01-1996
Category-Caste	SC -Buddhist (37)		
PWD Type	N.A.		
Religious Minority	N.A.		
Linguistic Minority	N.A.		
Type of Candidature	Maharashtra State Candidate - Type A		
Qualification Details			
Examination	Obtained/Out of	Percentage	
B.Pharmacy Aggregate :	3234/4800	67.38	
Merit Details			
All India Level Merit No.	892		
Status of Provisional Allotment Details for CAP Round - III			
Choice Code Alloted	518512610		
Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy,Pravaranagar		
Course	Quality Assurance Techniques		
Seat Type	GOPEH	Preference No. Alloted	2

IMPORTANT INSTRUCTIONS :

1. Reporting to the ARC as per Allotment of CAP Round III if seat allotted for first time in CAP Round III, is from 14-08-2018 to 17-08-2018 Up to 5 PM.
2. Reporting to the Allotted Institute and Confirmation of Admission by submitting required documents and payment of fees is from 14-08-2018 to 19-08-2018 Up to 5 PM.
3. Candidates who have already reported to ARC for seat confirmation at the time of their first time allotment in the previous rounds & got betterment or their earlier allotment is retained, shall directly report to the Institute for admission.
- 4.1 - Candidates should submit Caste Validity Certificate/ Tribe Validity Certificate before 30 August 2018 at Application Receipt Centers to claim Category benefit for admission, otherwise your admission shall stand cancelled.
- 5.1 - Candidates should submit Non Creamy Layer Certificate valid up to 31/03/2019 on or before 30 August 2018, at Application Receipt Centers to claim Category benefit for admission, otherwise your admission shall stand cancelled.

Printed On:14-08-2018 11:51:11 PM
URL:<http://mpharm18.dtemaharashtra.org/mpharm18/index.php/allotment/displayallotment>

TRUE COPY
[Signature]
Principal
PRAVARA RURAL COLLEGE OF
PHARMACY, PRAVARANAGAR

[Signature]
Principal
Pravara Rural College of Pharmacy,
Pravaranagar, A/p. Loni-413736



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

KHOSE SHIVPRASAD DINKAR

State Common Entrance Test Cell, Maharashtra State, Mumbai 8th Floor, New Excelior Building, A.K. Nayak Marg, Fort, Mumbai-400001 (M.S.) Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019	
Application ID : MPH18101130	
Mode of Admission : Non Sponsored	
Personal Details	
Full Name	KHOSE SHIVPRASAD DINKAR
Nationality	Indian
Gender	Male
Date of Birth	04-04-1996
Annual Family Income (₹)	15,000 - 50,000
Category-Caste	OPEN
Religious Minority/Linguistic Minority	N.A.
PWD Type	N.A.
Type of Candidature	Maharashtra State Candidate - Type A
Allotment Details	
All India Merit Number	910
Allotted Choice Code	518512610
Allotted Seat Type	GOVERN
Preference No.	1
Reporting Details	
Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Tuition Fees (₹)	17910/-
Course	518512610-Quality Assurance Techniques
Development Fees (₹)	9280/-
Admission Date	01-08-2018
Other Fees (₹)	0/-
Admission Type	CAP Round 1
Total Fees (₹)	27190/-
Remark: confirmed	
Declaration by Candidate : I hereby agree to conform to rules, acts and laws enforced by Government, I hereby undertake that so long as I am student of College/Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Institute of the college/institute will have rights to expel, suspend me from the institute, for any disobedience of the rules prescribed by the college/institute/university/Government and the undertakings given above.	
Date: 01-08-2018	Signature of The Candidate (KHOSE SHIVPRASAD DINKAR)
Place: LONI	
INSTITUTE USE ONLY	
Declaration by the College/Institute : We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019 on verification of Candidate's identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.	
Seal of Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar	Signature of Institute Officer (51851)
Reported On: 01-08-2018 03:06:39 PM	Reported By: 51851
Printed On: 01-08-2018 03:06:50 PM	Printed By: 51851
Last Modified On: 01-08-2018 03:06:39 PM	Last Modified By: 51851
Principal Pravara Rural College of Pharmacy Pravaranagar, A.P. Loni-413736	



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

LANDGE KUSHAL RAMDAS

State Common Entrance Test Cell, Maharashtra State, Mumbai 8th Floor, New Excelsior Building, A.K.Nayak Marg, Fort, Mumbai-400001.(M.S.) Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019	
Mode of Admission : Non Sponsored	
Application ID : MPH18100039	
Personal Details	
Full Name	LANDGE KUSHAL RAMDAS
Nationality	Indian
Gender	Male
Date of Birth	16-10-1995
Annual Family Income (₹)	50,001 - 1,00,000
Category-Caste	OPEN
Religious	N.A.
Minority/Linguistic Minority	N.A.
PWD Type	N.A.
Type of Candidature	Maharashtra State Candidate - Type A
Allotment Details	
All India Merit Number 989	
Reporting Details	
Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Tuition Fees (₹)	16000/-
Development Fees (₹)	9280/-
Other Fees (₹)	0/-
Total Fees (₹)	25280/-
Remark	confirmed
Declaration by Candidate : I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the Institute/College will have rights to expel, rusticate me from the Institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.	
Date: 18-08-2018	Signature of The Candidate (LANDGE KUSHAL RAMDAS)
Place : Loni	
INSTITUTE USE ONLY	
Declaration by the College/Institute : We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.	
Seal of Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar	Signature of Institute Officer (5185)
Reported On : 18-08-2018 01:25:18 PM	Reported By: 5185
Printed On : 18-08-2018 01:25:25 PM	Printed By: 5185
Last Modified On : 18-08-2018 01:25:18 PM	Last Modified By: 5185
Principal Pravara Rural College of Pharmacy Pravaranagar, A.P. Loni-413736	



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

LOLAGE MAYURI VIJAYKUMAR

Receipt-cum-Acknowledgement of Seat Acceptance Status Form of First Year Of Two Year Full Time Post-Graduate Course In Phar...

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State Common Entrance Test Cell, Maharashtra State, Mumbai
8th Floor, New Excelsior Building, A.K.Nayak Marg, Fort, Mumbai-400001.(M.S.)
Receipt-cum-Acknowledgement of Seat Acceptance of CAP Round - I for Admission to First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019

Application ID : MPH1802124

Version No : 1

Personal Details

Full Name	LOLAGE MAYURI VIJAYKUMAR		
Nationality	Indian		
Date of Birth	18-07-1995	Gender	Female
Category	OBC - Sonar	Annual Family Income (₹)	15,001 - 50,000
Linguistic Minority	N.A.	Category for Admission	OBC - Sonar
Person with Disability	N.A.	Religious Minority	N.A.
Qualifying Exam	SSC	SSC Aggregate	73.64 %
Qualifying Exam	HSC	HSC Aggregate	51.50 %
Qualifying Exam	Bpharm (Appearing)	Bpharm Aggregate	68.15 %

GPAT Examination Details

Roll No	2141018710	Score	01
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Provisional Allotment Details for CAP Round - I

Institute Allotted	S185-Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Course Allotted	Pharmacognosy
Choice Code Allotted	S18S01910
Seat Type Allotted	OPEN

Seat Acceptance Fee Details

Payment Status	Successful	Paid Amount (₹)	₹ 1000/-
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Seat Acceptance Details

Seat Acceptance Status:	Freeze
Seat Acceptance Confirmation Details:	Confirmed

Date: 30-07-2018

Place :

Signature of Candidate
(LOLAGE MAYURI VIJAYKUMAR)

ARC Use Only

Declaration : We hereby declare that, we are reporting this Candidate to our ARC for M - Pharmacy 2018 - 2019 on verification of Candidate's Identity. The Candidate has paid the Fees mentioned in this receipt. We also declare that the seat acceptance form of Candidate is confirmed in presence of the Candidate.

Confirmed On: 30-07-2018 04:31:22 PM
Printed On: 30-07-2018 04:31:25 PM
Last Modified On: 30-07-2018 04:31:22 PM
URL: http://mpharm18.dtemaharashtra.org/mpharm18/rc_reports.php/rc_reporting/admitreceipt?id=MTAYMT10&rnd=MQ==

Seal of ARCS012

Signature of ARC Officer (ARCS012)
Confirmed By: ARCS012
Printed By: ARCS012
Last Modified By: ARCS012

Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni- 413 736

ARC 5012



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

MANKAR SHUBHAM POPAT

Receipt-cum-Acknowledgement for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) 2018 - 2019

State Common Entrance Test Cell, Maharashtra State, Mumbai
8th Floor, New Excelior Building, A.K.Nayak Marg, Fort, Mumbai-400001 (M.S.)
Receipt-cum-Acknowledgement for Admission to First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019

Membership Status : Non
Application ID : NP918102425
Application Fee : ₹ 1000
Version : 3

GPAT Details
GPAT Score : 74
GPAT Rank : 13623

Personal Details :
Name : MANKAR SHUBHAM POPATRAO
Nationality : Indian
Sex : Male
Date of Birth : 01/06/1997
Religion : Hindu
Category (Sr.No.) : OPEN
Annual Family Income (in ₹) : 50,000 - 1,00,000
Mother Tongue : N.A.
Type : Maharashtra State Candidate - Type Maharashtra State Candidate - Type A
Address of Candidate : N.A.
Minority/Linguistic Minority : N.A.
Aadhaar Number : 879756281223

Payment Details
Successful
Paid Amount (Rs.) : 1000

Pharmacy Status : Appearing
B. Pharmacy University : Savitribai Phule Pune University

Qualification Details :
Marks Obtained :
Out of :
Percentage :
Pharmacy Aggregate Marks : Appearing
12th/H.S.C. Aggregate : 372
10th/H.S.C. Aggregate : 353
500
74.4
650
54.31

List of Submitted Documents at the time of verification at FC
Sr. No. :
1. Valid GPAT Score card
2. Birth Certificate of the Candidate Indicating the place of birth in Maharashtra.
3. Birth Certificate of the Candidate Indicating the place of birth in India.
4. Statement of marks obtained at 12th/HSC or its Equivalent Examination.
5. Statement of marks obtained at 10th/SSC or its Equivalent Examination

Remark : Confirmed

Declaration
I have read all the rules of admission and on understanding these Rules, I have filled this Application Form for consideration of submission of Application Form at FC for the admission to First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the academic year 2018 - 2019. The information given by me in this application and in Proforma-I 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.

Signature of the Candidate (MANKAR SHUBHAM POPATRAO)
18-07-2018

Confirmed By: FCS185
Printed On: 18-07-2018 02:06:53 PM
Printed By: FCS185

FC USE ONLY
Principal
Pravara Rural College of Pharmacy
Pravara Nagar, P.O. Loni-413736
Signature of FCS185
Pharmacy



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

MEHTA KAVITA JAGDISHJI

State Common Entrance Test Cell, Maharashtra State, Mumbai 8th Floor, New Excelsior Building, A.K.Nayak Marg, Fort, Mumbai-400001.(M.S.) Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019	
Application ID : MPH18100112	Mode of Admission : Non Sponsored
Personal Details	
Full Name	MEHTA KAVITA JAGDISHJI
Nationality	Indian
Date of Birth	08-12-1997
Gender	Female
Category-Caste	OPEN
Annual Family Income (₹)	50,001 - 1,00,000
Religious Minority/ Linguistic Minority	N.A
PWD Type	N.A
Type of Candidature	Maharashtra State Candidate - Type A
Allotment Details	
All India Merit Number	1593
Allotted Choice Code	518581910
Allotted Seat Type	GOPEN
Preference No.	4
Reporting Details	
Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Tuition Fees (₹)	16828/-
Development Fees (₹)	9280/-
Other Fees (₹)	0/-
Total Fees (₹)	26108/-
Remark	confirmed
Declaration by Candidate : I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the Institute/College will have rights to expel, rusticate me from the Institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undersigned given above.	
Date: 18-08-2018	Signature of The Candidate (MEHTA KAVITA JAGDISHJI)
Place :	
INSTITUTE USE ONLY	
Declaration by the College/Institute : We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019 on verification of Candidate's identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.	
Seal of Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar	Signature of Institute Officer (5185)
Reported On: 18-08-2018 01:11:29 PM	Reported By: 5185
Printed On: 18-08-2018 01:11:36 PM	Printed By: 5185
Last Modified On: 18-08-2018 01:11:29 PM	Last Modified By: 5185
PRINCIPAL	
Pravara Rural College of Pharmacy Pravaranagar, A/p. Loni-413735	
Principal Pravara Rural College of Pharmacy Pravaranagar, A/p. Loni- 413735	



PRAVARA RURAL EDUCATION SOCIETY'S

PRAVARA RURAL COLLEGE
OF PHARMACY

LONI

MHASKE PRATIKSHA BHARAT

State Common Entrance Test Cell, Maharashtra State, Mumbai
8th Floor, New Excelior Building, A.K.Nayak Marg, Fort, Mumbai-400001.(M.S.)
Receipt-cum-Acknowledgement of Institute Level Admission as Institute Level Seat for Admission to First Year-Of
Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019

Application ID : MPH18102141

Personal Details :

Full Name	MHASKE PRATIKSHA BHARAT	Sponsorship Status	Non Sponsored
Nationality	Indian		
Gender	Female	Date of Birth	25-06-1997
Category-Caste	OPEN	Annual Family Income (₹)	15,001 - 50,000
Applied For EBC	No		
PH Type	N.A.		
Type of Candidature	Maharashtra State Candidate - Type A		

B.Pharmacy Status : Passed

B.Pharmacy Details

Examination	Qualification Details:	B. Pharmacy University	Savitribai Phule Pune University
B.Pharmacy Final Year/Semester	Marks Obtained		
12th/H.S.C. Aggregate	3084	Out of	4800
10th/S.S.C. Aggregate	423		650
Institute Details :	366		550

Institute Details :

Institute Name	5185 - Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar (Un-Aided - Non-Autonomous - Non-Minority)	Course Name	5185B1910-Pharmacognosy
Tuition Fees (₹)	5000/-	Admission Date	30-08-2018
Development Fees (₹)	2000/-	Admission Type	Institute Level Seat
Other Fees (₹)	0/-	Remark	Confirmed
Total Fees (₹)	7000/-		

Declaration by Candidate : I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the Institute/college will have rights to expel, rusticate me from the institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

Date: 25-10-2018

Place :

Signature of the Candidate
(MHASKE PRATIKSHA BHARAT)

INSTITUTE USE ONLY

Declaration by the College/Institute : We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018-2019 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar

Reported On: 30-08-2018 10:16:41 AM
Printed On : 25-10-2018 11:10:09 AM
Last Modified On 130-08-2018 10:18:41 AM

Signature of Institute Officer (5185)

Reported By: 5185
Printed By: 5185
PRINCIPAL
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736

Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni- 413 736



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

NALAWADE DIPAK DADASAHEB

Receipt-cum-Acknowledgement for First Year Of Two Year Full Time Post-Graduate Course in Pharmacy (M. Pharm.) 2018 - 2019

8th Floor, New Excelstar Building, A.K. Nayik Marg, Fort, Mumbai-400003.(M.S.)
Receipt-cum-Acknowledgement for Admission to First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019

Application ID : MPH-18102197 Application Fee : ₹ 800 Version : 4

GPAT Candidate GPAT Score : 77 GPAT Rank : 12707

Personal Details:

Name : NALAWADE DIPAK DADASAHEB
Gender : Male
Date of Birth : 10/11/1996
Religion : Hindu
Annual Family Income (in ₹) : 15,001 - 50,000
Caste : N.A.
Maharashtra State Candidate - Type Maharashtra State Candidate - Type A
Minority/Linguistic Minority : N.A.
Roll Number : 351570369174

Payment Details:

Status : Successful Paid Amount (Rs.) : 800

Pharmacy Status : Passed B. Pharmacy University : Savitribai Phule Pune University

Qualification Details:

Section Marks Obtained Out of Percentage
Theory Aggregate Marks : 2868 4800 59.75
P.T. Aggregate : 365 550 66.36
O.T. Aggregate : 370 550 67.27

List of Submitted Documents at the time of verification at FC:

1. Valid GPAT Score card
2. The School Leaving Certificate indicating the Place Of Birth in Maharashtra
3. Non-Creantcy Layer Certificate valid upto 31st March 2019
4. Statement of marks obtained at 10th/SSC or its Equivalent Examination
5. Statement of marks obtained at 12th/HSC or its Equivalent Examination
6. B. Pharm. Degree Marksheet
7. School Leaving Certificate after passing Qualifying Examination
8. Certificate of the Indian Nationality of the candidate
9. Caste Certificate stating that the caste is recognised under backward class category in Maharashtra
10. Caste / Tribe Vaidity Certificate issued by Caste / Tribe Certificate Scrutiny Committee

Remark : Confirmed

Declaration

I have read all the rules of admission and on understanding these Rules, I have filled this Application Form for consideration of submission of application form at FC for the admission to First Year Of Two Year Full Time Post-Graduate Course in Pharmacy (M. Pharm.) for the academic year 2018 - 2019. The information given by me in this application and in informed is true to the best of my knowledge & belief. It is further stated 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 returned. Further I will be subject to legal and/or penal action as per the provisions of the law.

Re : 30-07-2018

Signature of the Candidate (NALAWADE DIPAK DADASAHEB)

Confirmed On: 20-07-2018 06:42:33 PM Confirmed By: FC5185 Printed On: 20-07-2018 11:35:12 AM Printed By: FC5185

FC USE ONLY

Signature of the Principal

Signature of FC5185

Pravara Rural College of Pharmacy, Pravaranagar

Signature of FC5185

1/2



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

PACHORE RUTUJA SANJAY

State Common Entrance Test Cell, Maharashtra State, Mumbai 8th Floor, New Excelsior Building, A.K.Nayak Marg, Fort, Mumbai-400001. (M.S.) Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019	
Application ID : MPH18101338	
Mode of Admission : Non Sponsored	
Personal Details	
Full Name	RUTUJA SANJAY PACHORE
Nationality	Indian
Gender	Female
Date of Birth	11-05-1996
Annual Family Income (₹)	50,001 - 1,00,000
Category-Caste	OPEN
Religious Minority/Linguistic Minority	N.A.
PWD Type	N.A.
Type of Candidature	Maharashtra State Candidate - Type B
Allotment Details	
All India Merit Number 992	
Reporting Details	
Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Tuition Fees (₹)	16828/-
Course	518581910-Pharmacognosy
Development Fees (₹)	9280/-
Admission Date	18-08-2018
Other Fees (₹)	0/-
Admission Type	CAP Round
Total Fees (₹)	26108/-
Remark	confirmed
Declaration by Candidate : I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the Institute/college will have rights to expel, rusticate me from the Institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking of my study.	
Date: 22-09-2018	Signature of The Candidate (RUTUJA SANJAY PACHORE)
Place :	
INSTITUTE USE ONLY	
Declaration by the College/Institute : We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.	
Seal of Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar	Signature of Institute Officer (5185)
Reported On: 18-08-2018 01:13:40 PM	Reported By: 5185
Printed On: 22-09-2018 03:12:47 PM	Printed By: 5185
Last Modified On: 18-08-2018 01:13:40 PM	Last Modified By: 5185
Pravara Rural College of Pharmacy Pravaranagar, A.P. Loni-413738	
Principal Pravara Rural College of Pharmacy Pravaranagar, A.P. Loni-413738	

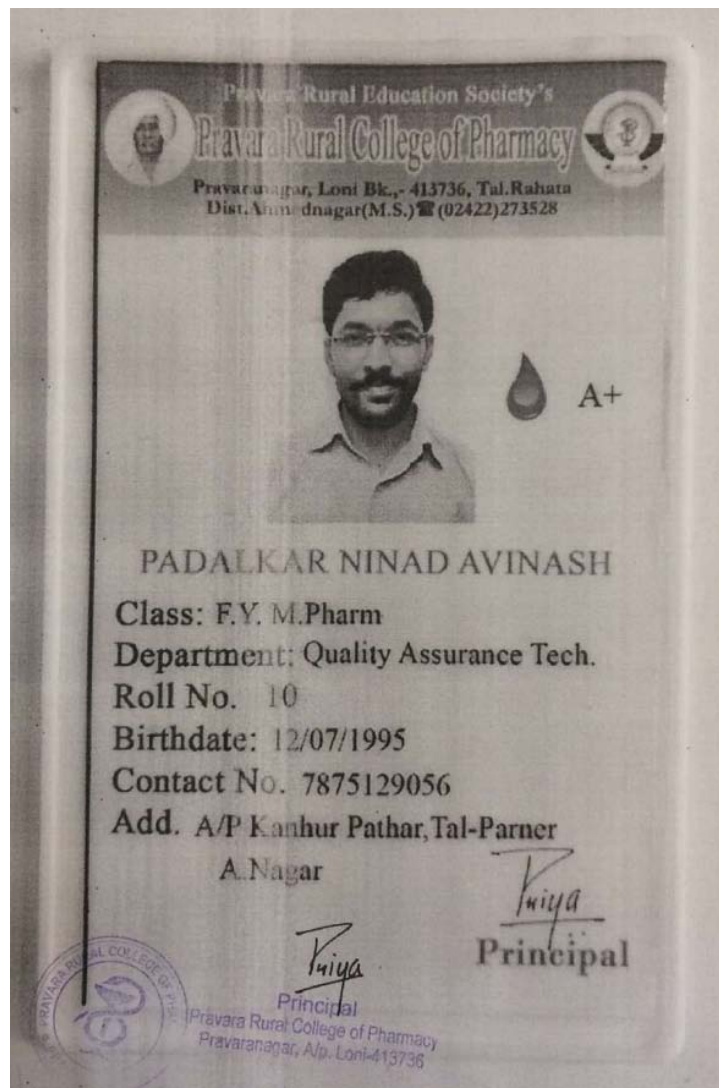


PRAVARA RURAL EDUCATION SOCIETY'S

PRAVARA RURAL COLLEGE
OF PHARMACY

LONI

PADALKAR NINAD AVINASH





PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

PAGARE AMRAPALI ANIL

State Common Entrance Test Cell, Maharashtra State, Mumbai
8th Floor, New Excelior Building, A.K.Hayak Marg, Fort, Mumbai-400001 (M.S.)
Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of Two Year Full
Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019

Application ID : MPH18103329 Mode of Admission : Non Sponsored

Personal Details

Full Name: PAGARE AMRAPALI ANIL
Nationality: Indian Gender: Female
Date of Birth: 29-08-1995 Annual Family Income (₹): 5,00,000 - 5,50,000
Category-Caste: SC-Mahar
Religious: Minority/Linguistic: N/A
Minority: PWD Type: N/A
Type of Candidature: Maharashtra State Candidate - Type A

Admission Details

All India Merit Number: 1542
Allotted Choice Code: 515402115
Allotted Seat Type: JSC
Preference No.: 7

Reporting Details

Institute: Mahatma Gandhi Vidya Mandir's Pharmacy College, Panchavati, Nashik
Tuition Fees (₹): 0 Course: 5154021 (M-Pharmacology)
Development Fees (₹): 0 Admission Date: 19-08-2018
Other Fees (₹): 4727 Admission Type: CAR Round 1
Total Fees (₹): 4727

Remark: Rs. 4727 fees paid

Declaration by Candidate: I hereby declare that I am a student of the Maharashtra State Common Entrance Test Cell, Mumbai and I have not been declared ineligible for admission to any other educational institution. I have not been declared ineligible for admission to any other educational institution. I have not been declared ineligible for admission to any other educational institution.

Date: 19-08-2018
Place: _____
Signature of The Candidate: PAGARE AMRAPALI ANIL

INSTITUTE USE ONLY

Declaration by the College/Institute: We hereby declare that we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019 on verification of Candidate's Identity. The Candidate has paid the fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Mahatma Gandhi Vidya Mandir's Pharmacy College, Panchavati, Nashik
Signature of Institute Officer (5154)
Reported On: 19-08-2018 01:20:40 PM
Printed On: 19-08-2018 01:20:40 PM
Last Modified On: 19-08-2018 01:20:40 PM
Reported By: 5154
Printed By: 5154
Last Modified By: 5154

Principal
Principal
Pravara Rural College of Pharmacy
Pravara Road, Loni - 431 228



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

PAWAR AKASH BUDHAJI

State Common Entrance Test Cell, Maharashtra State, Mumbai	
8th Floor, New Excelior Building, A.K.Nayak Marg, Fort, Mumbai-400001 (M.S.)	
Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019	
Application ID : MPH18100837	Mode of Admission : Non Sponsored
Personal Details	
Full Name : AKASH BUDHAJI PAWAR	Gender : Male
Nationality : Indian	Annual Family Income (₹) : 15,001 - 50,000
Date of Birth : 20-08-1996	Category-Caste : ST/VJ NT(A) -Vader
Religious : N/A	Minority/Lingualic Minority : N/A
PWD Type : N/A	Type of Candidature : Maharashtra State Candidate - Type A
Admission Details	
All India Merit Number : 1273	
Reporting Details	
Institute : Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar	
Tuition Fees (₹) : 0/-	Course : 51850210-Pharmaceutical Chemistry
Development Fees (₹) : 9280/-	Admission Date : 17-08-2018
Other Fees (₹) : 0/-	Admission Type : CAP Round 1
Total Fees (₹) : 9280/-	Remark : confirmed
Declaration by Candidate : I hereby agree to conform to rules, acts and laws notified by Government. I hereby undertake that no long as I am student of College/ Institute, I will not follow in a manner which may lead to disrepute to the academy to take disciplinary action against me. I fully acknowledge that the Principal/Instructor of the institution/college will have rights to award, withdraw the from the Institute, for any infringement of the rules prescribed by the institution/college/Department and the conducting agency.	
Date : 17-08-2018	Signature of The Candidate : (AKASH BUDHAJI PAWAR)
Place :	
INSTITUTE USE ONLY	
Declaration by the College/Institute : We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.	
Seal of Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar	Signature of Institute Officer (5185)
Reported On : 17-08-2018 10:51:58 AM	Reported By : 5185
Printed On : 17-08-2018 10:52:09 AM	Printed By : 5185
Last Modified On : 17-08-2018 10:51:58 AM	Last Modified By : 5185
Principal :  Pravara Rural College of Pharmacy Pravaranagar, A/p. Loni-413736	



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

PAWAR PRATIKSHA RAMESH

State Common Entrance Test Cell, Maharashtra State, Mumbai
8th Floor, New Excelior Building, A.K.Nayak Marg, Fort, Mumbai-400001 (M.S.)
Receipt-Cum-Acknowledgement of Seat Acceptance of CAP Round - I for Admission to First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019

Application ID : MPH18103578 Version No : 1

Personal Details

Full Name	PAWAR PRATIKSHA RAMESH	Gender	Female
Nationality	Indian	Annual Family Income (₹)	15,001 - 50,000
Date of Birth	06-07-1996	Category for Admission	OBC - Kunabi #
Category	OBC - Kunabi	Religious Minority	N.A
Linguistic Minority	N.A	Person with Disability	N.A
Qualifying Exam	SSC	SSC Aggregate	76.89 %
Qualifying Exam	HSC	HSC Aggregate	58.31 %
Qualifying Exam	Bpharm (Appearing)	Bpharm Aggregate	72.79 %

GPAT Examination Details

Roll No	2161020706	Score	91
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Provisional Allotment Details for CAP Round - I

Institute Allotted	S185-Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Course Allotted	Pharmacognosy
Choice Code Allotted	S185B1910
Seat Type Allotted	GOVERN
Prefer No Allotted	1

Seat Acceptance Fee Details

Payment Status	SUCCESSFUL	Paid Amount (₹)	₹ 1000/-
Remark			

Seat Acceptance Details

Seat Acceptance Status:	Freeze
Seat Acceptance Confirmation Details:	Confirmed

Date: 31-07-2018

Place : _____

ARC Use Only

Declaration : We hereby declare that, we are reporting this Candidate to our ARC for M - Pharmacy 2018 - 2019 on verification of Candidate Identity. The Candidate has paid the Fees mentioned in this receipt. We also declare that the seat acceptance form of Candidate is confirmed in presence of the Candidate.

Seal of ARC5012

Signature of ARC Officer (ARC5012)
Confirmed By: ARC50
Printed By: ARC50
Last Modified By: ARC50

Confirmed On: 31-07-2018 11:13:54 AM
Printed On: 31-07-2018 11:13:57 AM
Last Modified On: 31-07-2018 11:13:54 AM
URL: http://mpharm18.dtemaharashtra.org/mpharm18/rc_reports.php/rc_reporting/admitreceipt?id=MTA2NTc4&rnd=MQ==

Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736



**PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI**

POPATIYA AFREEN ASIF

Receipt-cum-Acknowledgement of Seat Acceptance Status Form of First Year Of Two Year Full Time Post-Graduate Course in Pharmacy

State Common Entrance Test Cell, Maharashtra State, Mumbai
8th Floor, New Excelior Building, A.K.Nayak Marg, Fort, Mumbai-400001 (M.S.)
Receipt-cum-Acknowledgement of Seat Acceptance of CAP Round - I for Admission to First Year Of Two Year Full Time Post-Graduate Course in Pharmacy (M. Pharm.) for the year 2018 - 2019

Form ID : NPH1803763

Version No : 1

Personal Details

Full Name	POPATIYA AFREEN ASIF
Nationality	Indian
Date of Birth	07-12-1996
Gender	Female
Category	OPEN
Annual Family Income (₹)	50,000 - 1,00,000
Unopposite Minority	N.A.
Category for Admission	OPEN
Person with Disability	N.A.
Religious Minority	N.A.
Qualifying Exam	SSE
SSE Aggregate	76.18 %
Qualifying Exam	HSC
HSC Aggregate	55.39 %
Qualifying Exam	Bpharm (Appearing)
Bpharm Aggregate	71.71 %

Examination Details

Roll No	2141020069
Score	100

Provisional Allotment Details for CAP Round - I

Allotted	S185-Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Quality Assurance Techniques	
Seat Allotted	S18512810
Seat Allotted	OPEN

Seat Acceptance Fee Details

Payment Status	Successful
Paid Amount (₹)	₹ 1000/-

Seat Acceptance Details

Seat Status	Freeze
Seat Confirmation Details	Confirmed

07-07-2018

Signature of Candidate
Afreen Popatiya
POPATIYA AFREEN ASIF

Barcode

ARC Use Only

We hereby declare that, we are reporting this Candidate to our ARC for M - Pharmacy 2018 - 2019 on verification of Candidate's
The Candidate has paid the Fees mentioned in this receipt. We also declare that the seat acceptance form of Candidate is confirmed
of the Candidate.

Seal of ARCS012

Signature of ARC Member (ARCS012)
Confirmed By ARCS012
Printed By ARCS012
Last Modified By ARCS012

07-07-2018 04:22:48 PM
07-07-2018 04:22:52 PM
07-07-2018 04:22:48 PM
http://mpharm18.dtemaharashtra.org/mpharm18/rc_reports.php/rc_reporting/admitreceipt?id=HTA9NcYz&rc=MQ==

Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

PULATE HARSHADA KONDIRAM

State Common Entrance Test Cell, Maharashtra State, Mumbai
20th Floor, New Exam Building, A. N. Nayak Marg, Fort, Mumbai-400023 (M. S.)
Responsible for Acknowledgement of Seat Acceptance of CAP Round - III for Admission for First Year of Two Year Full Time B.A.
Diploma Course in Pharmacy (M. Pharm.) for the year 2018 - 2019

Roll No: 210102082

Personal Details

Full Name: Pulate Harshada Kondiram	
Nationality: Indian	Gender: Female
Date of Birth: 21-07-1998	Annual Family Income (₹): 15,000 - 20,000
Category: OBC	Category for Admission: OBC
Language: Marathi	Religious Minority: N/A
Person with Disability: N/A	
Qualifying Exam: 12th	SAC Aggregate: 75.45 %
Qualifying Exam: 12th	MSC Aggregate: 68.22 %
Qualifying Exam: 12th	Pharm Aggregate: 68.02 %

Examination Details

Roll No: 210102082	Score: 71
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Provisional Allotment Details for CAP Round - III

Is Allotted	Yes
Admitted	Yes
Conf. Allotted	Yes
Conf. Admitted	Yes

Seat Acceptance Fee Details

Payment Status: Successful	Paid Amount (₹): 15,000
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Seat Acceptance Details

Seat Status: Freeze	Confirmed
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Signature of Candidate: Pulate Harshada Kondiram

Signature of Officer (ARC): [Signature]

Confirmed By: ARC

Printed By: ARC

Last Modified By: ARC

Seal of ARC 5012

Signature of Principal: [Signature]

Principal of Pharmacy



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

SHELKE HARSHALI LAXMAN





**PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI**

SHAIKHN JABBAR DAUD

162

State Common Entrance Test Cell, Maharashtra State, Mumbai
6th Floor, New Excelsior Building, A.K.Nayak Marg, Fort, Mumbai-400001. (M.S.)
Receipt-cum-Acknowledgement of Seat Acceptance of CAP Round - III for Admission to First Year of Two Year Full Time Post-Graduate Course in Pharmacy (M. Pharm.) for the year 2018 - 2019.

Application ID: MPH18100902 Version No: 1

Personal Details

Full Name	SHAIKH JABBAR DAUD
Nationality	Indian
Date of Birth	20-07-1993
Category	QBC - Malane
Linguistic Minority	N.A.
Person with Disability	N.A.
Qualifying Exam	SSC
Qualifying Exam	HSC
Qualifying Exam	Bpharm
Gender	Male
Annual Family Income (₹)	15,001 - 50,000
Category for Admission	QBC - Malane
Religious Minority	N.A.
SSC Aggregate	63.68 %
HSC Aggregate	60.83 %
Bpharm Aggregate	60.04%

GPAT Examination Details

Roll No	1901012558
Score	71

Provisional Allotment Details for CAP Round - III

Institute Allotted	S183-Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Course Allotted	Pharmaceutical Chemistry
Choice Code Allotted	S18302210
Seat Type Allotted	GOBC
Prof No Allotted	2

Seat Acceptance Fee Details

Payment Status	Successful
Paid Amount (₹)	₹ 1000/-
Remark	

Seat Acceptance Details

Seat Acceptance Status:	Freeze
Seat Acceptance Confirmation Details:	Confirmed

Date: 18-08-2018

Place

Declaration: We hereby declare that, we are reporting this Candidate to our ARC for M - Pharmacy 2018 - 2019 on verification of Candidate's Identity. The Candidate has paid the Fee mentioned in this receipt. We also declare that the seat acceptance form of Candidate is confirmed in presence of the Candidate.

ARC Use Only

Confirmed On: 18-08-2018 11:06:18 AM
Printed On: 18-08-2018 11:06:20 AM
Last Modified On: 18-08-2018 11:06:18 AM
URL: http://mpharm18.dtemaharashtra.org/mpharm18/rc_reports.php/rc_reporting/admitreceipt?id=MTAwODAy&rnd=Nw==

Seal of ARC5012

Signature of ARC Officer (ARC5012)
Confirmed By: ARC5012
Printed By: ARC5012
Last Modified By: ARC5012

Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

SHIRURE DHIRAJ SANJAY

8/27/2018 M - Pharmacy 2018 - 2019

State Common Entrance Test Cell, Maharashtra State, Mumbai
8th Floor, New Excelisior Building, A.K.Nayak Marg, Fort, Mumbai-400001 (M.S.)
Receipt-cum-Acknowledgement of Institute Level Admission as Additional Round for Admission to
First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 -
2019

Application ID : MPH18103371 Sponsorship Status : Non Sponsored

Personal Details :

Full Name	SHIRURE DHIRAJ SANJAY	Date of Birth	28-07-1996
Nationality	Indian	Annual Family Income (₹)	50,001 - 1,00,000
Gender	Male	Category-Caste	ODC - Gurav
Applied For EBC	No	PH Type	N.A.
Type of Candidature	Maharashtra State Candidate - Type A		

B-Pharmacy Details

B.Pharmacy Status	Passed	B. Pharmacy University	Savitribai Phule Pune University
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Qualification Details:

Examination	Marks Obtained	Out of	Percentage
B.Pharmacy Final Year/Semester	2962	4800	61.71
12th/H.S.C. Aggregate	378	650	58.15
10th/S.S.C. Aggregate	429	500	85.8

Institute Details :

Institute Name	5191 - Padmashree Dr. Vithalrao Vikhe Patil Foundation's College of Pharmacy, Ahmednagar (Un-Aided - Non-Autonomous - Non-Minority)		
Tuition Fees (₹)	0/-	Course Name	519112610-Quality Assurance Techniques
Development Fees (₹)	3546/-	Admission Date	25-08-2018
Other Fees (₹)	1454/-	Admission Type	Against CAP
Total Fees (₹)	5000/-	Remark	Confirm

Declaration by Candidate : I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that as long as I am student of College/Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the Institute/College will have rights to expel, rusticate me from the Institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

Date: 27-08-2018

Signature of The Candidate (SHIRURE DHIRAJ SANJAY)

Place :

INSTITUTE USE ONLY

Declaration by the College/Institute : We hereby declare that, we are admitting this Candidate to our College/Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018-2019 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Padmashree Dr. Vithalrao Vikhe Patil Foundation's College of Pharmacy, Ahmednagar

Reported On: 27-08-2018 10:44:51 AM
Printed On: 27-08-2018 10:44:53 AM
Last Modified On: 27-08-2018 10:44:51 AM

Signature of Institute Officer (5191) Principal
College of Pharmacy, Ahmednagar

Reported By: 5191
Printed By: 5191
Last Modified By: 5191

Principal
Pravara Rural College of Pharmacy
Pravaranganagar, A/p. Loni- 413 /36



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

TAMBE RUPALI BHANUDAS

7/30/2018 Receipt-cum-Acknowledgement of Seat Acceptance Status Form of First Year Of Two Year Full Time Post-Graduate Course in Pharmacy (M.S.) State Common Entrance Test Cell, Maharashtra State, Mumbai 8th Floor, New Excelior Building, A.K.Nayak Marg, Fort, Mumbai-400001.(M.S.) Receipt-cum-Acknowledgement of Seat Acceptance of CAP Round - I for Admission to First Year Of Two Year Full Time Post-Graduate Course in Pharmacy (H. Pharm.) for the year 2018 - 2019

Application ID : MPH18102480 Version No : 1

Personal Details

Full Name	TAMBE RUPALI BHANUDAS		
Nationality	Indian	Gender	Female
Date of Birth	08-07-1997	Annual Family Income (₹)	15,001 - 50,000
Category	OBC - Kunabi	Category for Admission	OBC - Kunabi
Linguistic Minority	N.A.	Religious Minority	N.A.
Person with Disability	N.A.		
Qualifying Exam	SSC	SSC Aggregate	82.18 %
Qualifying Exam	HSC	HSC Aggregate	62.15 %
Qualifying Exam	Bpharm (Appearing)	Bpharm Aggregate	78.42%

GPAT Examination Details

Roll No	2251022820	Score	83
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Provisional Allotment Details for CAP Round - I

Institute Allotted	S180-Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar		
Course Allotted	Quality Assurance Techniques		
Choice Code Allotted	S18S12610		
Seat Type Allotted	GOBC		
Seat No Allotted	1		

Seat Acceptance Fee Details

Payment Status	Successful	Paid Amount (₹)	₹ 1000/-
Remark			

Seat Acceptance Details

Seat Acceptance Status:	Freeze
Seat Acceptance Confirmation Details:	Confirmed

Date: 30-07-2018

Place :

ARC Use Only

Declaration : We hereby declare that, we are reporting this candidate to our ARC for H - Pharmacy 2018 - 2019 on verification of Candidate's Identity. The Candidate has paid the Fees mentioned in this receipt. We also declare that the seat acceptance form of Candidate is confirmed in presence of the Candidate.

Confirmed On: 30-07-2018 04:16:34 PM
Printed On: 30-07-2018 04:16:36 PM
Last Modified On: 30-07-2018 04:16:34 PM
URL: http://mpharm18.dtemaharashtra.org/mpharm18/rc_reports.php/rc_reporting/admitrecptId=HTAYNDgw&rnd=HQ==

Seal of ARC5012

Signature of ARC Officer (ARC5012)
Confirmed By: ARC5012
Last Modified By: ARC5012

PRAVARA RURAL COLLEGE OF PHARMACY
ARC 5012

Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736



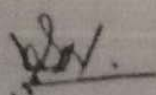
PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

TANDLE LAHU DINKAR

 Jagdamba Education Society's
SND COLLEGE OF PHARMACY
BABHULGAON, Tal. Yeola, Dist Nashik



Name :- Tandale Lahu Dinkar
Branch :- Chemistry
Class :- First Year
Roll No. :- 04
Mob :- 8275943026
Address :- Rajuri (N.)


PRINCIPAL
SND COLLEGE OF PHARMACY
BABHULGAON, TAL. YEOLA


Principal
Pravara Rural College of Pharmacy
Pravaranagar, Alp. Loni-413736



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

THORAT MOHINI BHAUSAHEB

State Common Entrance Test Cell, Maharashtra State, Mumbai	
811, Floor, New Education Building, A.K. Nayak Marg, Fort, Mumbai - 400001, (M.S.)	
Receipt-cum-Acknowledgement of Enrolment Reporting for Admission to First Year Of Two Year Full Time Post-Graduate Course in Pharmacy (M. Pharm.) for the year 2018 - 2019	
Application ID : MPH18102701	Mode of Admission : Non Sponsored
Personal Details	
Full Name: Thorat Mohini Bhausaheb	Gender: Female
Nationality: Indian	Annual Family Income (₹): 15,001 - 50,000
Date of Birth: 07-02-1997	
Category-Caste: OBC - A	
Religious: S.A.	
Minority/Linguistic Minority: N/A	
PWD Type: N/A	
Type of Candidature: Maharashtra State-Candidature - Type-A	
Scholarship Details	
AN India Award Number: 725	
Reporting Details	
Institute: Padm D.Y. Patil College of Pharmacy, Akurdi, Pune	
Tuition Fees (₹): 44,000/-	Course: 63712610-Quality Assurance Techniques
Development Fees (₹): 9682/-	Admission Date: 17-08-2018
Other Fees (₹): 0/-	Admission Type: CAP Round 1
Total Fees (₹): 53682/-	
Remark: All original documents are submitted at College	
Declaration by Candidate: I hereby agree to adhere to rules, which are notified by Government. I hereby undertake that so long as I am student of College/Institute, I will not be engaged in a manner which may result in bringing the authorities to take disciplinary action against me. I fully understand that the Principal/Dean of the Institution/College will have rights to remove/cancel me from the Institute, for any transgression of the rules prescribed by the Government/University/Government and the authorities of the Institute.	
Date: 17-08-2018	Signature of The Candidate (THORAT MOHINI BHAUSAHEB)
Place:	
INSTITUTE USE ONLY	
Declaration by the College/Institute: We hereby declare that we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course in Pharmacy (M. Pharm.) for the year 2018 - 2019 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the candidate.	
Seal of Padm D.Y. Patil College of Pharmacy, Akurdi, Pune	Signature of Institute Officer (6371)
Reported On: 17-08-2018 11:02:50 AM	Reported By: 6371
Printed On: 17-08-2018 11:03:07 AM	Printed By: 6371
Last Modified On: 17-08-2018 11:02:50 AM	Last Modified By: 6371
Principal Pravara Rural College of Pharmacy Akurdi, Akurdi, Pune - 411004	



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

TODMAL SUHAS ASHOK

State Commission Entrance Test Cell, Maharashtra State, Mumbai
8th Floor, New Exhibition Building, A-8, Naxos Mall, Fort, Mumbai-400017 (M.S.)
Receipt-Acknowledgement for Admission to First Year Of Two Year Post Graduate Course in Pharmacy (M. Pharm.)
for the year 2018 - 2019

Application ID: 1001820000 Application Fee: ₹ 10000 Version: 1.1

PAT Status: GPAT Candidate GPAT Score: 182 GPAT Rank: 742

Personal Details

Full Name: TODMAL SUHAS ASHOK
Nationality: Indian
Gender: Male Date of Birth: 21/07/1996
State-Category (S.C. No.): OPLN Religion: Hindu
Mother Tongue: Marathi Annual Family Income (in ₹): 6,00,000
VVD Type: N/A
Type of Candidature: Maharashtra State Candidate - Type Maharashtra State Candidate - Type A
Religious Minority/Linguistic Minority: N/A
JID Number: 612084767367

Payment Details

Payment Status: Successful Paid Amount: ₹ 10000
B. Pharmacy Status: Passed B. Pharmacy University: Maharashtra State University
Qualification Details

Examination	Marks Obtained	Out of	Percentage
B. Pharmacy Aggregate Marks	703	800	87.87
10th/H.S.C. Aggregate I	430	500	86.00
12th/H.S.C. Aggregate I	411	500	82.20

List of Submitted Documents at the time of application at FC

Sr. No.	Document
1	Statement of marks obtained at 10th/H.S.C. or its Equivalent Examination
2	Statement of marks obtained at 12th/H.S.C. or its Equivalent Examination
3	School Leaving Certificate after passing Qualifying Examination
4	The School Leaving Certificate indicating the Nationality of the Candidate as Indian or The Place of Birth in India
5	English Certificate of Candidate indicating that he/she is domiciled in the State of Maharashtra
6	Valid GPAT Score card
7	B. Pharm. Degree Marksheet

FC Remark: CONFIRMED

Declaration

I have read all the rules of admission and on understanding these Rules, I have filled this Application Form for consideration of submission of Application Form at FC for the admission to First Year Of Two Year Post Graduate Course in Pharmacy (M. Pharm.) for the academic Year 2018 - 2019. The information given by me in this Application and in Demand is true to the best of my knowledge & belief. If at any stage, it is found that I have furnished wrong information and/or submitted false documents, 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: 23-07-2018
Place:

Signature of the Candidate (TODMAL SUHAS ASHOK)

Confirmed By: FCS185 Printed On: 23-07-2018 09:31:46 AM Printed By: FCS185

FC USE ONLY

Last modified on: 23-07-2018 09:31:46 AM Last modified by: FCS185

Verified by: [Signature]
Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413 736

GOVERNMENT POLYTECHNIC
PRAVARA
5006
PRAVARA RURAL COLLEGE OF PHARMACY
PRAVARANAGAR



PRAVARA RURAL EDUCATION SOCIETY'S

PRAVARA RURAL COLLEGE
OF PHARMACY

LONI

VIKHE MEGHA DNYANESHWAR

State Common Entrance Test Cell, Maharashtra State, Mumbai
8th Floor, New Excelior Building, A.X. Nayak Marg, Fort, Mumbai-400001.(M.S.)
Receipt-cum-Acknowledgement of Institute Level Admission as Institute Level Seat for Admission to First Year Of
Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019

Application ID : MPH18101579 Sponsorship Status : Non Sponsored

Personal Details :

Full Name	VIKHE MEGHA DNYANESHWAR		
Nationality	Indian	Date of Birth	02-11-1998
Gender	Female	Annual Family Income (₹)	50,001 - 1,00,000
Category-Caste	OPEN		
Applied for EBC	No		
PH Type	N.A.		

Type of Candidature: Maharashtra State Candidate - Type A

B-Pharmacy Details

B.Pharmacy Status	Passed	B. Pharmacy University	Savitribai Phule Pune University
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Qualification Details:

Examination	Marks Obtained	Out of	Percentage
B.Pharmacy Final Year/Semester	3495	4800	72.81
12th/H.S.C. Aggregate	358	650	55.08
10th/S.S.C. Aggregate	429	550	78

Institute Details :

Institute Name	5185 - Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar (Un-Aided - Non-Autonomous - Non-Minority)		
Tuition Fees (₹)	16828/-	Course Name	5185B1910-Pharmacognosy
Development Fees (₹)	9280/-	Admission Date	30-08-2018
Other Fees (₹)	0/-	Admission Type	Institute Level Seat
Total Fees (₹)	26108/-	Remark	Confirmed

Declaration by Candidate : I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the Institute/college will have rights to expel, rusticate me from the Institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

Date: 30-08-2018

Place :

Signature of The Candidate
(VIKHE MEGHA DNYANESHWAR)

INSTITUTE USE ONLY

Declaration by the College/Institute : We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018-2019 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

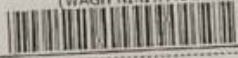
Seal of Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar

Reported On: 30-08-2018 10:17:00 AM
Printed On: 30-08-2018 10:17:02 AM
Last Modified On: 30-08-2018 10:17:00 AM

Signature of Institute Officer (5185)
PRINCIPAL
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736

Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736



 संयुक्त राज्य	State Common Entrance Test Cell, Maharashtra State, Mumbai 8th Floor, New Excelior Building, A.K.Nayak Marg, Fort, Mumbai-400001.(M.S.) Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019			
Application ID : MPH18103688		Mode of Admission : Non Sponsored		
Personal Details				
Full Name	WAGH NIKITA RAMRAO			
Nationality	Indian	Gender		Female
Date of Birth	27-03-1997	Annual Family Income (₹)		15,001 - 50,000
Category-Caste	OBC -Kunabi			
Religious	N.A			
Minority/Lingulstic Minority	N.A			
PWD Type	N.A.			
Type of Candidature	Maharashtra State Candidate - Type A			
Allotment Details				
All India Merit Number		1679		
Reporting Details				
Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar			
Tution Fees (₹)	11828/-	Course	518582210-Pharmaceutical Chemistry	
Development Fees (₹)	9280/-	Admission Date	18-08-2018	
Other Fees (₹)	0/-	Admission Type	CAP Round 1	
Total Fees (₹)	21108/-			
Remark	confirmed			
Declaration by Candidate : I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the institute/college will have rights to expel, rusticate me from the Institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.				
Date: 18-08-2018		Nikita Signature of The Candidate (WAGH NIKITA RAMRAO)		
Place :				
INSTITUTE USE ONLY				
Declaration by the College/Institute : We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.				
Seal of Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar		Signature of Institute Officer (5185) PRINCIPAL Pravara Rural College of Pharmacy Pravaranagar, A.P. Loni-413736 Printed By: 5185 Last Modified By: 5185		
Reported On: 18-08-2018 11:19:01 AM				
Printed On : 18-08-2018 11:19:09 AM				
Last Modified On : 18-08-2018 11:19:01 AM				
Priya Principal Pravara Rural College of Pharmacy Pravaranagar, A.P. Loni- 413 736				



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

ANAP VIDYATAI RAVINDRA

State Common Entrance Test Cell, Maharashtra State, Mumbai
305, Government Polytechnic Building, 49, Kherwadi, Bandra (E), Mumbai 400 051 (M.S.)
Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of Two
Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2017 - 2018

Application ID : MPH17101763 Mode of Admission : Non Sponsored

Personal Details

Candidate Name: ANAP VIDYATAI RAVINDRA		
Nationality: Indian	Gender: Female	
Date of Birth: 30-04-1996	Annual Family Income (₹): 15,001 - 50,000	
Category-Caste: OBC - Mail	Applied For EDC: No	
Religious Minority: Immigrant Minority	N/A	

PHD Type: Not Applicable
Type of Candidate: Maharashtra State Candidate - Type A

Admission Details

State Level Merit Number: 2485
Admitted Choice Code: 518581910
Admission Seat Type: OBC
Preference No: 1

Reporting Details

Institute: Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar	
Tuition Fees (₹): 0/-	Course: 518581910-Pharmadgnosy
Development Fees (₹): 5109/-	Admission Date: 17-08-2017
Other Fees (₹): 0/-	Admission Type: CAP Round
Total Fees (₹): 5109/-	

Remarks: confirmed

Declaration by Candidate: I hereby agree to conform to rules, acts, and laws enforced by Government. I hereby undertake that so long as I am student of this Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the Institute/College will have rights to expel, rusticate me from the Institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

Date: 17-08-2017

Place: _____

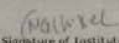
SIGNATURE OF THE CANDIDATE

(ANAP VIDYATAI RAVINDRA)

INSTITUTE USE ONLY

Declaration by the College/Institute: We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2017 - 2018 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Reported On: 17-08-2017 10:02:48 AM
Printed On: 17-08-2017 10:02:54 AM
Last Modified On: 17-08-2017 10:02:48 AM
URL: http://mpharm17.dte.maharashtra.org/mpharm17/institute_report.php/institute_reporting/acm/receipt?id=ODQ4&md=Mum

SIGNATURE OF INSTITUTE OFFICER (5185)

73111001
Reported By: 5185
Printed By: 5185
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni- 413 736

Principal

Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni- 413 736



PRAVARA RURAL EDUCATION SOCIETY'S

PRAVARA RURAL COLLEGE
OF PHARMACY

LONI

ANDHALE ATUL RAMRAO

7/30/2017 Receipt-cum-Acknowledgement for Seat Acceptance for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) 2017...

State Common Entrance Test Cell, Maharashtra State, Mumbai
305, Government Polytechnic Building, 49, Kherwadi, Bandra (E), Mumbai 400051 (M.S.)
Receipt-cum-Acknowledgement of Seat Acceptance of CAP Round - I for Admission to First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2017 - 2018

Application ID : MPH17103033 Seat Acceptance Status Form Version : 1 Mode of Admission : Non Sponsored

Personal Details

Full Name	ANDHALE ATUL RAMRAO	Gender	Male
Nationality	Indian	Annual Family Income (₹)	15,001 - 1,00,000
Date of Birth	01-04-1996	Applied For EBC	No
Category-Caste	OPEN	PWD Type	Not Applicable
Religious Minority/Linguistic Minority	N.A	Type of Candidature	Maharashtra State Candidate - Type A

Status of Provisional Allotment Details for CAP Round - I

Institute Allotted	5185-Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Course Allotted	Pharmaceutical Chemistry
Choice Code Allotted	5180E2219
Seat Type Allotted	GOPEH
Prof No Allotted	1

Seat Acceptance Fee Details

Payment Mode	Online Payment	Payment Status	Successful
Paid Amount	5000/- (₹)	Fee Paid Date	30-07-2017
Remark			

Seat Acceptance Details

ARC Seat Acceptance Status: **Freeze**

Seat Acceptance Confirmation Details: **Confirmed**

List of Submitted Documents Required at the time of verification at ARC.

Sr. No.	Document
1	Statement of marks obtained at 10th/SSC or its Equivalent Examination
2	Statement of marks obtained at 12th/HSC or its Equivalent Examination
3	Certificate of the Indian Nationality of the candidate
4	Domicile Certificate of Candidate indicating that he/she is Domiciled in the State of Maharashtra
5	Caste Certificate stating that the caste is recognised under backward class category in Maharashtra
6	Caste / Tribe Validity Certificate issued by Caste / Tribe Certificate Scrutiny Committee
7	Receipt of Online Payment
8	Valid GPAT Score card

List of Not Submitted Documents Required at the time of verification at ARC

Sr. No.	Document
1	Non-Creamy Layer Certificate valid upto 31st March 2018

Date: 30-07-2017

Place:

Signature of The Candidate (ANDHALE ATUL RAMRAO)

Signature of ARC Officer (ARCS012)

Confirmed By: ARCS012
Printed By: ARCS012
Last Modified By: ARCS012

Seal of ARCS012
Confirmed On: 30-07-2017 11:20:18 AM
Printed On: 30-07-2017 11:20:20 AM
Last Modified On: 30-07-2017 11:20:18 AM
URL: http://mpharm17.dtmaharashtra.org/mpharm17/rc_reports.php/rc_reporting/admitrecelp1?id=MTA2MDMz&md=NQ==

Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni- 413 736

Scanned with CamScanner



PRAVARA RURAL EDUCATION SOCIETY'S

PRAVARA RURAL COLLEGE
OF PHARMACY

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DIGHE PRACHI NAMDEO

State Common Entrance Test Cell, Maharashtra State, Mumbai
305, Government Polytechnic Building, 49, Kherwadi, Bandra (E), Mumbai 400051. (M.S.)
Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of Two
Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2017 - 2018

Application ID: MBH17102770 Mode of Admission: Non Sponsored

Personal Details	
Full Name	DIGHE PRACHI NAMDEO
Gender	Female
Date of Birth	25.04.1995
Annual Family Income (₹)	1,50,000 - 2,00,000
Category-Caste	OBC - Khatol
Applied For EBC	No
Religious Minority/Linguistic Minority	N/A
PWD Type	Not Applicable
Type of Candidature	Maharashtra State Candidate - Type A

State Level Merit Number 1828
Allotted Choice Code 515581910
Allotted Seat Type OBC
Preference No. 1

Reporting Details	
Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Tuition Fees (₹)	0/-
Development Fees (₹)	1100/-
Other Fees (₹)	0/-
Total Fees (₹)	1100/-
Remark	Confirmed
Course	515581910-Pharmacognosy
Admission Date	16-08-2017
Admission Type	CAP Round

Declaration by Candidate: I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Instructor of the institute/college will have rights to expel, rusticate me from the institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

Date: 16-08-2017

Place: _____

Signature of The Candidate
(DIGHE PRACHI NAMDEO)

Barcode

INSTITUTE USE ONLY

Declaration by the College/Institute: We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2017 - 2018 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Principal of Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar

Created On: 16-08-2017 02:33:51 PM
Printed On: 16-08-2017 02:33:51 PM
Last Modified On: 16-08-2017 02:33:51 PM
URL: http://m.pharm17.dtemaharashtra.org/mpharm17/institute_report.php/institute_reporting/admitreceipt?INDE4&md=Mw==

Signature of Institute Officer (S185)
Principal
Pravara Rural College of Pharmacy
Pravaranagar, Loni-431336

Signature of Principal
Principal
Pravara Rural College of Pharmacy
Pravaranagar, Loni-431336



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

GAWALI VIDYA SHAHAJI

State Common Entrance Test Cell, Maharashtra State, Mumbai

State Common Entrance Test Cell, Maharashtra State, Mumbai
305, Government Polytechnic Building, 49, Kherwadi, Bandra (E), Mumbai 400051. (M.S.)
Provisional Allotment for CAP Round - I for Admission to First Year Of Two Year Full Time Post-Graduate
Course In Pharmacy (M. Pharm.) for the year 2017 - 2018
Published On : 26-07-2017 at 05:00 PM

Application ID : MPH17101899 | GPAT Score: 42

Personal Details			
Name	GAWALI VIDYA SHIVAJI		
Gender	Female	Date of Birth	02-05-1995
Category-Caste	SC -Mahar (37)		
PWD Type	Not Applicable		
Religious Minority	N.A.		
Linguistic Minority	N.A.		
Type of Candidature	Maharashtra State Candidate - Type A		

Qualification Details		
Examination	Obtained	Percentage
B.Pharmacy Aggregate :	3109/4800	64.77

State Level General Merit No. 2115

Status of Provisional Allotment Details for CAP Round - I

Choice Code Allotted	518582210		
Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar		
Course	Pharmaceutical Chemistry		
Seat Type	GSC	Preference No. Allotted	2

IMPORTANT INSTRUCTIONS :

1. If seat is allotted, select Freeze/ Slide/ Float option through Candidate's Login, Pay Seat Acceptance Fee through using Debit/Credit card, Net Banking OR Demand Draft (DD) and Report to any convenient identified ARC along with Original Documents (for Verification purpose only). The payment can be done at ARC also.
2. If candidate, who allotted any option may FREEZE the admission or he/she may choose from SLIDE/FLOAT for the betterment in subsequent CAP Rounds. If the candidate secures a seat of higher preference in subsequent rounds, then it would be automatically result in the forfeiture of the seat accepted in the earlier round.
3. The Seat Acceptance Fee shall be Rs. 5,000/- for OPEN, VJ/DT, NT, SBC/DBC Category and Rs. 1,000/- for SC, ST Category Candidates. The candidate has to pay the Seat Acceptance Fee during first reporting only. This fee shall be transferred to the institution after deducting Rs.1,000/- towards processing fee.
4. ARC Officer shall confirm the Seat after verification of the original documents and ensuring that the Candidate meets all the eligibility norms. The ARC centre in-charge shall issue the Online Receipt of acceptance which the candidate will have to retain.
5. For cancellation of CAP admission before reporting to the institution, the candidate shall apply to the ARC to which he/she has paid Seat Acceptance Fee.
6. If a candidate fails to report for the acceptance of allotted seat at ARC in scheduled time, it will be treated as he/she has rejected the allotted seat.
7. After Final CAP Round III, the candidate shall report to the Institution allotted and confirm their admission in the Institution.

Printed On: 26-08-2017 02:39:26 PM | Printed By: MPH17101899

URL: <http://mpharm17.dtemaharashtra.org/mpharm17/index.php/allotment/displayallotment?id=MTAxODk5&rnd=MQ==>

Principal
Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni- 413 736



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

GODGE SHUBHAM VILAS

State Common Entrance Test Cell, Maharashtra State, Mumbai
305, Government Polytechnic Building, 49, Kherwadi, Bandra (E), Mumbai - 400051 (M.S.)
Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of Two
Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2017 - 2018

Application ID : MPH17103032

Mode of Admission : Non Sponsored

Personal Details

Full Name	GODGE SHUBHAM VILAS	Gender	Male
Nationality	Indian	Annual Family Income (₹)	15,001 - 50,000
Date of Birth	04-12-1995	Applied for EBC	No
Caste / Community	OPEN		
Religious Minority / Linguistic Minority	N.A.		
PWD Type	Not Applicable		
Type of Candidature	Maharashtra State Candidate - Type A		

Admission Details

State Level Merit Number	831
Allotted Entrance Code	518562210
Allotted Seat Type	OPEN
Preference No.	1

Reporting Details

Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar		
Tuition Fees (₹)	0/-	Course	518562210-Pharmaceutical Chemistry
Development Fees (₹)	6109/-	Admission Date	16-08-2017
Other Fees (₹)	0/-	Admission Type	CAP Round
Total Fees (₹)	6109/-		
Remark	confirmed		

Declaration by Candidate : I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the Institute/College will have rights to expel, rusticate me from the Institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

Date: 16-08-2017

Place: _____

Signature of The Candidate
(GODGE SHUBHAM VILAS)

Barcode

INSTITUTE USE ONLY

Declaration by the College/Institute : We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post Graduate Course In Pharmacy (M. Pharm.) for the year 2017 - 2018 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar

Reported On: 16-08-2017 09:21:41 AM
Printed On: 16-08-2017 09:21:48 AM
Last Modified On: 16-08-2017 09:21:44 AM
URL: http://mph17.dte.narashtra.org/mph17/institute_report.php/institute_reporting/admitreceipt?ic=MT15&id=MQ

Signature of Institute Officer (5185)
Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni- 413 736

Signature of Principal
Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni- 413 736



**PRAWARA RURAL EDUCATION SOCIETY'S
PRAWARA RURAL COLLEGE
OF PHARMACY
LONI**

HARDE SHUBHANGI LAXMAN

State Common Entrance Test Cell, Maharashtra State, Mumbai
305, Government Polytechnic Building, 49, Kherwadi, Bandra (E), Mumbai 400051 (M.S.)
Receipt-cum-Acknowledgement of Institute Level Admission as Against CAP Vacancy for Admission to First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2017 - 2018

Application ID : MPH17102718

Personal Details :

Full Name	HARDE SHUBHANGI LAXMAN		
Nationality	Indian	Date of Birth	13-05-1995
Gender	Female	Annual Family Income (₹)	15,001 - 50,000
Category-Caste	CBC - Kunabi	Applied For EBC	No
PH Type	Not Applicable		
Type of Candidature	Maharashtra State Candidate - Type A		

Sponsorship Status : Non Sponsored

B.Pharmacy Status : Passed

B-Pharmacy Details

Examination	Marks Obtained	Out of	Percentage
B.Pharmacy Final Year / Semester	3397	4800	70.77
12th / H.S.C. Aggregate	351	600	60.17
10th / S.S.C. Aggregate	471	550	85.64

Institute Details :

Institute Name	5185 - Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar (Un-Aided - Non-Autonomous - Non-University)		
Tuition Fees (₹)	5000/-	Course Name	518512610-Quelty Assurance Techniques
Development Fees (₹)	0/-	Admission Date	30-08-2017
Other Fees (₹)	0/-	Admission Type	Against CAP
Total Fees (₹)	5000/-	Remark	Confirmed

Declaration by Candidate : I hereby agree to conform to rules, acts and laws enforced by Government. I further undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compromising the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the Institute/College will have rights to expel, suspend me from the Institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

Date: 30-08-2017

Place :

Signature of The Candidate
HARDE SHUBHANGI LAXMAN

INSTITUTE USE ONLY

Declaration by the College/Institute : We hereby declare that, we are a First Year Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2017-2018 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar

Reported On: 30-08-2017 09:50:24 AM
Printed On: 30-08-2017 09:50:24 AM
Last Modified On: 30-08-2017 09:50:24 AM

Signature of Institute Officer (S185)

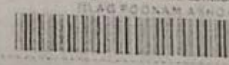
Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni- 413 736



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

ILAG POONAM ASHOK

 **State Common Entrance Test Cell, Maharashtra State, Mumbai**
305, Government Polytechnic Building, 49, Kherwadi, Bandra (E), Mumbai 400051. (M.S.)
Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of Two
Year Full Time Post-Graduate Course in Pharmacy (M. Pharm.) for the year 2017 - 2018

Application ID : MP/17101857		Mode of Admission : New Sponsored	
Personal Details			
Full Name	ILAG POONAM ASHOK		
Nationality	Indian	Gender	Female
Date of Birth	24-03-1996	Annual Family Income (₹)	15,001 - 50,000
Category-Caste	OPEN	Applied For EBC	No
Religious Minority/Linguistic Minority	N/A		
PWD Type	Not Applicable		
Type of Candidate	Maharashtra State Candidate - Type A		
Allotment Details			
State Level Merit Number: 1874			
Allotted Quota Code: 10512610			
Allotted Seat Type: GOVERNMENT			
Preference No: 1			
Reporting Details			
Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar		
Tuition Fees (₹)	0/-	Course	510512610- Quality Assurance Techniques
Development Fees (₹)	1109/-	Admission Date	17-08-2017
Other Fees (₹)	0/-	Admission Type	CAP Round
Total Fees (₹)	1109/-		
Remarks: Confirmed			
Declaration by Candidate : I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that as long as I am student of College/Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the Institute/College will have rights to expel, institute me from the Institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.			
Date: 17-08-2017			
Place			
Signature of The Candidate ILAG POONAM ASHOK			
			
INSTITUTE USE ONLY			
Declaration by the College/Institute : We hereby declare that, we are admitting this Candidate to our College/Institute for First Year Of Two Year Full Time Post-Graduate Course in Pharmacy (M. Pharm.) for the year 2017 - 2018 on verification of Candidate's identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.			
Seal of Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar			
Reported On: 17-08-2017 03:58:33 PM			
Printed On: 17-08-2017 03:58:36 PM			
Last Modified On: 17-08-2017 03:58:33 PM			
URL : http://mphin17.dtemaharashtra.org/mphin17/institute_report.php/institute/Pravara%20Rural%20College%20of%20Pharmacy/Pravaranagar,A/p,Loni-413736			
Signature of Institute Officer (SIRSI)			
Reported by: Principal			
Printed by: Principal			
Last Modified by: Principal			
Principal Pravara Rural College of Pharmacy Pravaranagar, A/p. Loni- 413 736			



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

MAHESH

99

State Common Entrance Test Cell, Maharashtra State, Mumbai
8th Floor, New Excelsior Building, A.K.Nayak Marg, Fort, Mumbai-400001.(M.S.)
Receipt-cum-Acknowledgement of Seat Acceptance of CAP Round - III for Admission to First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019

Application ID : MPH18103162 Version No : 1

Personal Details	
Full Name	JAYSHAYE MAHESH KARDHARI
Nationality	Indian
Date of Birth	01-12-1995
Gender	Male
Category	NT 3 (NT-D) - Vanjarli
Annual Family Income (₹)	50,001 - 1,00,000
Linguistic Minority	N.A.
Category for Admission	NT 3 (NT-D) - Vanjarli #
Person with Disability	N.A.
Religious Minority	N.A.
Qualifying Exam	SSC
SSC Aggregate	68.73 %
Qualifying Exam	HSC
HSC Aggregate	58.50 %
Qualifying Exam	Bpharm
Bpharm Aggregate	64.13%

GPAT Examination Details

Roll No	Score
2371038639	54

Provisional Allotment Details for CAP Round - III

Institute Allotted	Course Allotted	Choice Code Allotted	Seat Type Allotted	Prst No Allotted
S165-Pravara Rural Education Society's Pravara Rural College of Pharmacy,Pravararanagar	Pharmacognosy	S185B1910	ONTO	0

Seat Acceptance Fee Details

Payment Status	Paid Amount (₹)
Successful	₹ 1000/-

Remark: Original LC not uploaded

Seat Acceptance Status: Confirmed

Seat Acceptance Confirmation Details: Freeze

Date: 17-08-2018

Place : _____

Signature of Candidate (JAYSHAYE MAHESH KARDHARI)

ARC Use Only

Declaration : We hereby declare that, we are reporting this Candidate to our ARC for M - Pharmacy 2018 - 2019 on verification of Candidate's Identity. The Candidate has paid the Fees mentioned in this receipt. We also declare that the seat acceptance form of Candidate is confirmed in presence of the Candidate.

Confirmed On: 17-08-2018 03:23:09 PM
Printed On: 17-08-2018 03:23:13 PM
Last Modified On: 17-08-2018 03:23:09 PM
URL: http://mpharm18.dtemaharashtra.org/mpharm18/rc_reports.php/rc_reporting/admitrecapt?id=MTA2MTYy&rnd=Mw==

Seal of ARCS012

Signature of ARC Officer (ARCS012)
Confirmed By: ARCS012
Printed By: ARCS012
Last Modified By: ARCS012

ARC
S012

Principal
Pravara Rural College of Pharmacy
Pravararanagar, A/p. Loni- 413 736



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

JOJARE DIPTI CHANDRAKANT

State Common Entrance Test Cell, Maharashtra State, Mumbai
305 Government Polytechnic Building, 49, Kherwadi, Bandra (E), Mumbai 400051 (M.S.)
Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of Two
Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2017 - 2018

Application ID: N-071034-1

Mode of Admission: Non Sponsored

Personal Details

Name: JOJARE DIPTI CHANDRAKANT
Nationality: Indian
Date of Birth: 05-10-1995
Gender: Female
Category-Caste: OBC-Sonar
Annual Family Income (₹): 15,001 - 50,000
Religious Minority/Linguistic Minority: No
Applied For EBC: No
PwD Type: Not Applicable
Type of Candidate: Maharashtra State Candidate - Type A

Allotment Details

State Level Merit Number: 1867
Allotted Choice Code: 518512610
Allotted Seat Type: GOBC
Preference No: 1

Reporting Details

Institute: Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar

Tuition Fees: ₹ 2584/-
Development Fees: ₹ 545/-
Other Fees: ₹ 1/-
Total Fees: ₹ 3130/-

Course: 518512610-Quality Assurance Techniques
Admission Date: 16-08-2017
Admission Type: CAP Round

Remark: Confirmed

Declaration by Candidate: I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am a student of the college, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I understand that the Principal/Director of the institute/college will have rights to expel/rusticate me from the college for non-compliance with the rules prescribed by the college/institute/university/Government and the undertaking given above.

Date: 01/08/2017

Place: _____

Signature of The Candidate
JOJARE DIPTI CHANDRAKANT

INSTITUTE USE ONLY

Declaration by the College/Institute: We hereby declare that, we are admitting this Candidate to our College / Institute for Post Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2017 - 2018 on the condition of Candidate's Identity. The candidate has paid the fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar

Reported On: 01/08/2017 12:59:42 PM
Printed On: 01/08/2017 12:59:42 PM
Last Modified On: 01/08/2017 12:59:42 PM
URL: http://mpm1717104.maharashtra.org/ipharm17/institute_report.php/institute_reporting/admitreceipt

Signature of Institute Officer (5185)
Pravara Rural College of Pharmacy
Pravaranagar, A.P. Pooni
Last Modified By: 5185

Principal
Pravara Rural College of Pharmacy
Pravaranagar, A.P. Loni- 413 736



PRAVARA RURAL EDUCATION SOCIETY'S

PRAVARA RURAL COLLEGE
OF PHARMACY

LONI

KALAMKAR CHAITALI S.

State Common Entrance Test Cell, Maharashtra State, Mumbai
305, Government Polytechnic Building, 49, Kherwadi, Bandra (E), Mumbai 400051. (M.S.)
Provisional Allotment for CAP Round - III for Admission to First Year Of Two Year Full Time Post-Graduate
Course In Pharmacy (M. Pharm.) for the year 2017 - 2018
Published On : 13-08-2017 at 05:00 PM

Application ID : MPH17101732 GPAT Score: 81

Personal Details	
Full Name	KALAMKAR CHAITALI SANJAY
Gender	Female
Category-Caste	OBC - Mali (182)
PWD Type	Not Applicable
Religious Minority	N.A.
Linguistic Minority	N.A.
Type of Candidate	Maharashtra State Candidate - Type A

Qualification Details	
Examination	B. Pharmacy Aggregate :
Obtained	3271/4800
Percentage	68.15

Merit Details	
State Level General Merit No.	907

Allotment Details for CAP Round - III	
Choice Code Allotted	518512610
Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Course	Quality Assurance Techniques
Seat Type	GOPEN
Preference No.	1

Allotment Details for CAP Round - I	
Choice Code Allotted	518581910
Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Course	Pharmacognosy
Seat Type	GOPEN
Preference No.	2

IMPORTANT INSTRUCTIONS :

1. If seat is allotted, select Freeze/ Slide/ Float option through Candidate's Login, Pay Seat Acceptance Fee through using Debit/Credit card, Net Banking OR Demand Draft (DD) and Report to any convenient identified ARC along with Original Documents (for Verification purpose only). The payment can be done at ARC also.
2. If candidate, who allotted any option may FREEZE the admission or he/she may choose from SLIDE/FLOAT for the betterment in subsequent CAP Rounds. If the candidate secures a seat of higher preference in subsequent rounds, then it will be automatically result in the forfeiture of the seat accepted in the earlier round.
3. The Seat Acceptance Fee shall be Rs. 5,000/- for OPEN, VI/DT, NT, SBC/OBC Category and Rs. 1,000/- for SC, ST Category Candidates. The candidate has to pay the Seat Acceptance Fee during first reporting only. This fee shall be transferred to the institution after deducting Rs.1,000/- towards processing fee.
4. ARC Officer shall confirm the Seat after verification of the original documents and ensuring that the Candidate meets all the eligibility norms. The ARC centre in-charge shall issue the Online Receipt of acceptance which the candidate will have to retain.
5. For cancellation of CAP admission before reporting to the institution, the candidate shall apply to the ARC to which he/she has paid Seat Acceptance Fee.
6. If a candidate fails to report for the acceptance of allotted seat at ARC in scheduled time, it will be treated as he/she has rejected the allotted seat.
7. After Final CAP Round III, the candidate shall report to the Institution allotted and confirm their admission in the Institution.

Printed On: 26-08-2017 11:55:55 AM
URL: <http://mpharm17.dtemaharashtra.org/mpharm17/index.php/allotment/displayallotment?cid=MTA%20My&ind=MA>
Printed By: MPH17101732

Principal
Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni- 413 736



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

KHEDKAR BHAGYASHRI B.

Pravara Rural Education Society's
Pravara Rural College of Pharmacy
Pravara Nagar Loni Bk. 741336
Tal. Rahuri, Dist. Ahmednagar (M.S.)
Ph. (02422) 273528

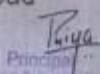


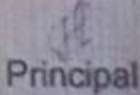
B+


Blood
Group

KHEDKAR BHAGYASHREE BALASAHEB

Class : M.Pharm
Date of Birth : 10.11.1995
Con. No.
Add. : Paithan, Tal. Paithan, Dist
Aurangabad


Principal
Pravara Rural College of Pharmacy


Principal



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

MULIK UJJWALA NARAYAN





PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

PANDURE PRITESH CHANDAN

1302017 Receipt-Acknowledgement for Seat Acceptance for First Year Of Two Year Full Time Post Graduate Course in Pharmacy (M. Pharm.) 2017

State Common Entrance Test Cell, Maharashtra State, Mumbai
305, Government Polytechnic Building, 45 Kharewad, Bandra (E) Mumbai 400015 (M.)
Receipt-Acknowledgement of Seat Acceptance of CAP Round - I for Admission in First Year of Two Year Full Time Post Graduate Course in Pharmacy (M. Pharm.) for the year 2017 - 2018

Application ID: MPH17122845 Seat Acceptance Status Form version: 1.0 Mode of Admission: New Appointment

Personal Details

Full Name: PRITESH PANDURE CHANDAN Gender: Male
Nationality: Indian Date of Birth: 10-09-1995 Annual Family Income (₹): 10,000
Category-Caste: ST - 1, ST-B, Other Applied for EBC: No
Religious Minority/Linguistic Minority: N/A
PwD Type: Not Applicable
Type of Candidature: Maharashtra State Candidate - Type A

Status of Provisional Allotment Details for CAP Round - I

Institute Allotted: PRAVARA RURAL EDUCATION SOCIETY'S PRAVARA RURAL COLLEGE OF PHARMACY, PRAVARANAGAR
Course Allotted: Pharmaceutics
Choice Code Allotted: 01000002
Seat Type Allotted: UR/B Other No Allotted: No

Seat Acceptance Fee Details

Payment Mode: Online Payment Payment Status: Successful
Paid Amount: Rs. 7,000/- Fee Paid Date: 10-07-2017
Remarks:

Seat Acceptance Details

ARC Seat Acceptance Status: Freeze
Seat Acceptance Confirmation Details: Confirmed

List of Submitted Documents Required at the time of verification at ARC

Sr. No. 1 Statement of marks obtained at 12th/10th or its Equivalent Examination
2 Statement of marks obtained at 12th/10th or its Equivalent Examination
3 Certificate of the Indian Nationality of the candidate
4 Domicile Certificate of Candidate indicating that he/she is Domiciled in the State of Maharashtra
5 Caste Certificate stating that the caste is recognized under backward class category in Maharashtra
6 Caste / Tribe / Validity Certificate issued by Caste / Tribe Certificate Scrutiny Committee
7 Non-Creamy Layer Certificate valid upto 31st March 2018
8 Receipt of Online Payment
9 Valid GPAT Score Card

Date: 10-07-2017
Place: _____
Signature of The Candidate: PRITESH PANDURE CHANDAN

ARC Use Only

Declaration: We hereby declare that, we are reporting this Candidate to our ARC for First Year Of Two Year Full Time Post Graduate Course in Pharmacy (M. Pharm.) for the year 2017 - 2018 on verification of Candidate's Identity. The Candidate has paid the Fee mentioned in this receipt. We also declare that the seat acceptance form of Candidate is confirmed in presence of the Candidate.

Seal of ARCSST
Confirmed On: 10-07-2017 12:28:41 PM
Printed On: 10-07-2017 12:28:18 PM
Last Modified On: 10-07-2017 12:28:43 PM
URL: http://mpharm17.dmaharashtra.org/mpharm17/rc_reports.php/rc_reporting/adminicapt720-HTA0216&md=MQ==

Signature of ARC Officer (ARCSST): _____
Confirmed By: ARCSST
Printed By: ARCSST
Last Modified By: ARCSST

ARC 5012
Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni- 413 736
Scanned by CamScanner



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

POKHARKAR SHRADDHA S.

State Common Entrance Test Cell, Maharashtra State, Mumbai
305, Government Polytechnic Building, A/2, Aherwadi, Bhandra, E, Mumbai-400053 (M.S.)
Receipt cum Acknowledgment of Seat Acceptance of CAP Round - I for Admission to First Year Of Two Year Full Time
Post-Graduate Course in Pharmacy (M. Pharm.) for the year 2017 - 2018

Application ID : MNH37188835 Seat Acceptance Status Form Version : 1 Mode of Admission : Non Sponsored

Personal Details

Full Name	POKHARKAR SHRADDHA S. SHIBHAI	Gender	Female
Nationality	Indian	Annual Family Income (₹)	10,001 - 20,000
Date of Birth	04-04-1996	Applied For SSC/As	
Category-Caste	OBC - Marathi		
Religious Minority/Linguistic Minority	N/A		
PWD Type	Not Applicable		
Type of Candidature	Maharashtra State Candidate - Type A		

Status of Provisional Allotment Details for CAP Round - I

Institute Allotted	E. J. & A. D. Chaudhary Trust's Pravara College of Pharmacy, Pravara, Aherwadi, Pune
Course Allotted	Pharmaceutics
Choice Code Allotted	110001130
Seat Type Allotted	General
Seat No. Allotted	

Seat Acceptance Fee Details

Payment Mode	Online Payment	Payment Status	Successful
Fee Paid Amount	₹10,000	Fee Paid Date	30-07-2017
Remarks			

Seat Acceptance Details

ARC Seat Acceptance Status: **Freeze**
Seat Acceptance Confirmation Status: **Confirmed**

List of Submitted Documents Required at the time of verification at ARC.

Sr. No.	Document
1	Statement of marks obtained at 10th/12th or its Equivalent Examination
2	Statement of marks obtained at 10th/12th or its Equivalent Examination
3	Certificate of the Indian Nationality of the candidate
4	Residence Certificate of Candidate indicating that he/she is Originated in the State of Maharashtra
5	Caste Certificate stating that the caste is recognised under backward class category in Maharashtra
6	Caste / Tribe / Vaidya Certificate issued by Caste / Tribe Certificate Scrutiny Committee
7	Non-Creamy Layer Certificate valid upto 31st March 2018
8	Receipt of Online Payment
9	Valid GRAT Score Card

Date: 30-07-2017
Place: _____

ARC Use Only

Declaration: We hereby declare that, we are reporting this Candidate to our ARC for First Year Of Two Year Full Time, P-Graduate Course in Pharmacy (M. Pharm.) for the year 2017 - 2018 on verification of Candidate's Identity. The Candidate has paid the Fee mentioned in this receipt. We also declare that the seat acceptance form of Candidate is confirmed in presence of Candidate.

Signature of ARC Officer (ARC)
Confirmed By: ARC
Printed By: ARC
Last Modified By: ARC
URL: http://msharm17.dentalpravarasociety.org/msharm17/rc_reports.php/rc_reporting/admitreceipt?id=MTAwNTMw&rnd=MQ

Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni- 413 736



**PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI**

PULATE SHUBHANGI P.

State Common Entrance Test Cell, Maharashtra State, Mumbai
305, Government Polytechnic Building, 49, Kherwadi, Bandra (E), Mumbai 400051. (M.S.)
Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of Two
Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2017 - 2018

Application ID : MPH1720196 Mode of Admission : Non Sponsored

Personal Details	
Full Name	PULATE SHUBHANGI PRASHAKA
Nationality	Indian
Gender	Female
Date of Birth	06-07-1996
Annual Family Income (₹)	50,000 - 1,00,000
Category-Caste	O.P.S.
Applied For EBC	No
Religious Minority / Linguistic Minority	No
PWD Type	Not Applicable
Type of Candidates	Maharashtra State Candidates - Type A

State Level Merit Number : 730
Allotted Choice Code : 518512618
Allotted Seat Type : OPEN
Preference No. : 1

Reporting Details	
Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Tuition Fees (₹)	0/-
Development Fees (₹)	6100/-
Other Fees (₹)	0/-
Total Fees (₹)	6100/-
Course	518512618-Quality Assurance Techniques
Admission Date	16-08-2017
Admission Type	CAP Round

Remark : Confirmed

Declaration by Candidate : I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/ Director of the Institute/College will have rights to expel, rusticate me from the Institute, for any infringement of the rules, prescribed by the college/institute/university/Government and the undertaking given above.

Date: 16-08-2017

Place

Signature of The Candidate
(PULATE SHUBHANGI PRASHAKA)

INSTITUTE USE ONLY

Declaration by the College/Institute : We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2017 - 2018 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Reported On: 16-08-2017 09:22:21 AM
Printed On: 16-08-2017 09:22:21 AM
Last Modified On: 16-08-2017 09:22:21 AM
URL: http://mpharm17.dte.maharashtra.org/mpharm17/institute_report.php/institute_reporting/admitreceipt?id=MTM&mid=MQ==

Signature of Institute Officer (S185)
Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni- 413 736

Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni- 413 736



**PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI**

ROKADE SNEHAL D.

State Common Entrance Test Cell, Maharashtra State, Mumbai
305, Government Polytechnic Building, 49, Kherwadi, Bandra (E), Mumbai 400051 (M.S.)
Receipt cum-Acknowledgement of Institute Reporting for Admission to First Year Of Two
Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2017 - 2018

Application ID : MPH17102731 Mode of Admission : Non Sponsored

Personal Details

Full Name	ROKADE SNEHAL DATTATRAYA		
Nationality	Indian	Gender	Female
Date of Birth	22-09-1995	Annual Family Income (₹)	15,001 - 50,000
Category-Caste	OBC - P	Applied for EBC	No
Religious Minority/Linguistic Minority	N/A		
PWD Type	Not Applicable		
Type of Candidate	Maharashtra State Candidate - Type A		

Admission Details

State Level Merit Number	934
Alotted Choice Code	518512610
Alotted Seat Type	GDPE
Preference No.	1

Reporting Details

Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar		
Tuition Fees (₹)	2564/-	Course	518512610-Quality Assurance Techniques
Development Fees (₹)	8545/-	Admission Date	16-08-2017
Other Fees (₹)	0/-	Admission Type	CAP Round
Total Fees (₹)	11109/-		
Remark	confirmed		

Declaration by Candidate : I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Dean of the institute/college will have rights to expel, rusticate me from the institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertakings given above.

Date: 16-08-2017

Place: _____

Signature of The Candidate
(ROKADE SNEHAL DATTATRAYA)

INSTITUTE USE ONLY

Declaration by the College/Institute : We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-graduate Course In Pharmacy (M. Pharm.) for the year 2017 - 2018 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Reported On: 16-08-2017 01:49:55 PM
Printed On: 16-08-2017 01:49:57 PM
Last Modified On: 16-08-2017 01:49:55 PM
URL: http://mpharm17.dtemaharashtra.org/mpharm17/institute_report.php/institute_reporting/admireceipt?cid=MzQy&mid=HQ==

Signature of Institute Officer (S185)
Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413 735

Signature of Principal
Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni- 413 735



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

ROKADE VIJAY GANPAT

State Common Entrance Test Cell, Maharashtra State, Mumbai
305, Government Polytechnic Building, 49, Kherwadi, Bandra (E), Mumbai 400051. (M.S.)
Receipt-cum-Acknowledgement of Seat Acceptance of CAP Round - II for Admission to First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2017 - 2018

Application ID : MPH17103506 Seat Acceptance Status Form Version : 1 Mode of Admission : Non Sponsored

Personal Details

Full Name	ROKADE VIJAY GANPAT
Nationality	Indian
Gender	Male
Date of Birth	28-07-1993
Annual Family Income (₹)	15,001 - 50,000
Category-Caste	SC - Mahar
Applied For EBC	No
Religious Minority/Linguistic Minority	N.A
PWD Type	Not Applicable
Type of Candidature	Maharashtra State Candidate - Type A

Status of Provisional Allotment Details for CAP Round - II

Institute Allotted	5185-Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Course Allotted	Quality Assurance Techniques
Choice Code Allotted	518512616
Seat Type Allotted	GSC
Pref No Allotted	1

Seat Acceptance Fee

Payment Mode	DD
DD Number	454720
DD Amount	1000/- (₹)
Bank Name	HDFC Bank
Branch Name	Loni
DD Date	08-08-2017
Fee Paid Date	08-08-2017
Remark	

Seat Acceptance Details

ARC Seat Acceptance Status: **Freeze**

Seat Acceptance Confirmation Details: **Confirmed**

List of Submitted Documents Required at the time of verification at ARC.

Sr. No.	Document
1	Valid GPAT Score card
2	Domicile Certificate of Candidate indicating that he/she is Domiciled in the State of Maharashtra
3	Caste / Tribe Validity Certificate issued by Caste / Tribe Certificate Scrutiny Committee
4	Caste Certificate stating that the caste is recognised under backward class category in Maharashtra
5	Certificate of the Indian Nationality of the candidate
6	Statement of marks obtained at 10th/SSC or its Equivalent Examination
7	Statement of marks obtained at 12th/HSC or its Equivalent Examination.
8	Receipt of Online Payment

Date: 08-08-2017

Place: _____

Signature of The Candidate (ROKADE VIJAY GANPAT)

ARC Use Only

Declaration : We hereby declare that, we are reporting this Candidate to our ARC for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2017 - 2018 on verification of Candidate's Identity. The Candidate has paid the Fees mentioned in this receipt. We also declare that the seat acceptance form of Candidate is confirmed in presence of the Candidate.

Seal of ARCS012
Confirmed On: 08-08-2017 01:59:19 PM
Printed On: 08-08-2017 01:59:22 PM
Last Modified On: 08-08-2017 01:59:19 PM
URL: http://mpharm17.dtemaharashtra.org/mpharm17/rc_reports.php/rc_reporting/admitreceipt?Id=MTA2NTA2&rnd=Mg==

Signature of Arc Officer (ARCS012)
Confirmed By: ARCS012
Printed By: ARCS012
Last Modified By: ARCS012

Thiya
Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni- 413 736

8/8/17, 1:58



SANGALE PANDURANG H.

7/30/2017 Receipt-cum-Acknowledgement for Seat Acceptance for First Year Of Two Year Full Time Post-Graduate Course in Pharmacy (M. Pharm.) 2017-2018

State Common Entrance Test Cell, Maharashtra State, Mumbai
305, Government Polytechnic Building, 49, Kherwadi, Bandra (E), Mumbai 400051. (M.S.)
Receipt-cum-Acknowledgement of Seat Acceptance of CAP Round - I for Admission to First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2017 - 2018

Application ID : MPH17181745 Seat Acceptance Status Form Version : 1 Mode of Admission : Non Sponsored

Personal Details

Full Name	SANGALE PANDURANG HARISHAU	Gender	Male
Nationality	Indian	Annual Family Income (₹)	15,001 - 50,000
Date of Birth	10-04-1994	Applied for EBC	No
Category-Caste	NT 3 (NT-O) -Vajeri	PWD Type	Not Applicable
Religious Minority/Linguistic Minority	N.A	Type of Candidature	Maharashtra State Candidate - Type A

Status of Provisional Allotment Details for CAP Round - I

Institute Allotted	S185-Prawara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Course Allotted	Quality Assurance Techniques
Choice Code Allotted	S18512610
Seat Type Allotted	OPEN
Prefer Not Allotted	1

Seat Acceptance Fee

Payment Mode	DD	DD Number	454354
DD Amount	5000 ₹	Bank Name	HDFC Bank
Branch Name	Yes	DD Date	29-07-2017
Fee Paid Date	30-07-2017	Remark	

Seat Acceptance Details

ARC Seat Acceptance Status: **Freeze**

Seat Acceptance Confirmation Details: **Confirmed**

List of Submitted Documents Required at the time of verification at ARC.

Sr. No.	1	Statement of marks obtained at 10th/SSC or its Equivalent Examination
2	Statement of marks obtained at 12th/HSC or its Equivalent Examination.	
3	Certificate of the Indian Nationality of the candidate	
4	Domicile Certificate of Candidate indicating that he/she is Domiciled in the State of Maharashtra	
5	Caste Certificate stating that the caste is recognised under backward class category in Maharashtra	
6	Caste / Tribe Validity Certificate issued by Caste / Tribe Certificate Scrutiny Committee	
7	Non-Creamy Layer Certificate valid upto 31st March 2018	
8	Receipt of Online Payment	
9	Valid GPAT Score card	

Date: 30-07-2017

Place: _____

Signature of The Candidate (SANGALE PANDURANG HARISHAU)

ARC Use Only

Declaration : We hereby declare that, we are reporting this Candidate to our ARC for First Year Of Two Year Full Time Post-Graduate Course in Pharmacy (M. Pharm.) for the year 2017 - 2018 on verification of Candidate's Identity. The Candidate has paid the Fees mentioned in this receipt. We also declare that the seat acceptance form of Candidate is confirmed in presence of the Candidate.

Seal of ARCS012
Confirmed On: 30-07-2017 09:47:01 AM
Printed On: 30-07-2017 09:47:02 AM
Last Modified On: 30-07-2017 09:47:01 AM
URL: http://mpharm17.dtmaharashtra.org/mpharm17/rc_reports.php/rc_reporting/admitreceipt?id=MTAxNzQ1&rnd=MQ==

Signature of ARC Officer (ARCS012)
Confirmed By: ARCS012
Printed By: ARCS012
Last Modified By: ARCS012

Principal

Principal

Scanned with CamScanner



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

SHEJUL MAHESH BABAN

8/16/2017 Receipt-cum-Acknowledgement for Seat Acceptance for First Year Of Two Year Full Time Post-Graduate Course in Pharmacy (M. Pharm.) 201...

State Common Entrance Test Cell, Maharashtra State, Mumbai
305, Government Polytechnic Building, 49, Kherwadi, Bandra (E), Mumbai 400051, (M.S.)
Receipt-cum-Acknowledgement of Seat Acceptance of CAP Round - III for Admission to First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2017 - 2018

Application ID : MPH17101708 | Seat Acceptance Status Form Version : 1 | Mode of Admission : Non Sponsored

Personal Details

Full Name	SHEJUL MAHESH BABANUAG	Gender	Male
Nationality	Indian	Annual Family Income (₹)	15,001 - 30,000
Date of Birth	22-09-1995	Applied For EBC	No
Category-Caste	OPEN	Religious Minority/Linguistic Minority	N.A
PWD Type	Not Applicable	Type of Candidature	Maharashtra State Candidate - Type A

Status of Provisional Allotment Details for CAP Round - III

Institute Allotted	5185-Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravara Nagar
Course Allotted	Quality Assurance Techniques
Choice Code Allotted	518512610
Seat Type Allotted	GOVERNMENT Vacant No Allotted 1

Seat Acceptance Fee Details

Payment Mode	Online Payment	Payment Status	Successful
Paid Amount	5000/- (₹)	Fee Paid Date	15-08-2017
Remark			

Seat Acceptance Details

ARC Seat Acceptance Status: **Freeze**

Seat Acceptance Confirmation Details: **Confirmed**

List of Submitted Documents Required at the time of verification at ARC.

Sr. No.	Document
1	Statement of marks obtained at 10th/SSC or its Equivalent Examination
2	Statement of marks obtained at 12th/HSC or its Equivalent Examination.
3	Certificate of the Indian Nationality of the candidate
4	Domicile Certificate of Candidate indicating that he/she is Domiciled in the State of Maharashtra
5	Receipt of Online Payment
6	Valid GPAT Score card
7	Defence Service Certificate Proforma - C-1
8	Domicile Certificate of Defence service personnel (Father / Mother)

Date: 15-08-2017

Place :

ARC Use Only

Declaration : We hereby declare that, we are reporting this Candidate to our ARC for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2017 - 2018 on verification of Candidate's Identity. The Candidate has paid the fees mentioned in this receipt. We also declare that the seat acceptance form of Candidate is confirmed in presence of the Candidate.

Seal of ARC5012
Confirmed On: 16-08-2017 10:10:33 AM
Printed On: 16-08-2017 10:10:33 AM
Last Modified On: 16-08-2017 10:10:33 AM
URL: http://mpharm17.dtmaharashtra.org/mpharm17/rc_reports.php/rc_reporting/admitreceipt?id=MTA0NzA4&rnd=Mw==

Signature of The Candidate (SHEJUL MAHESH BABANUAG)

Signature of ARC Officer (ARC5012)
Confirmed By: ARC5012
Printed By: ARC5012
Last Modified By: ARC5012

ARC 5012
Principal
Pravara Rural College of Pharmacy
Pravara Nagar, A/p. Loni- 413 736

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PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

SHELKE ARCHANA KHANDU

7/31/2017 Receipt-cum-Acknowledgement for Seat Acceptance for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) 201-
State Common Entrance Test Cell, Maharashtra State, Mumbai
305, Government Polytechnic Building, 49, Kherwadi, Bandra (E), Mumbai 400051, (M.S.)
Receipt-cum-Acknowledgement of Seat Acceptance of CAP Round - I for Admission to First Year Of Two Year Full Time
Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2017 - 2018

Application ID : MPH17102479 Seat Acceptance Status Form Version : 1 Mode of Admission : Non Sponsored

Personal Details

Full Name	SHELKE ARCHANA KHANDU	Gender	Female
Nationality	Indian	Annual Family Income (₹)	15,001 - 50,000
Date of Birth	27-03-1995	Applied For EBC	No
Category-Caste	NT 3 (NT-D) -Varjari		
Religious Minority/Lingualistic Minority	N.A		
PWD Type	Not Applicable		
Type of Candidature	Maharashtra State Candidate - Type A		

Status of Provisional Allotment Details for CAP Round - I

Institute Allotted	5185-Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Course Allotted	Pharmacognosy
Choice Code Allotted	518501910
Seat Type Allotted	GOPEN
Prof No Allotted	3

Seat Acceptance Fee

Payment Mode	DD	DD Number	159104
DD Amount	5000/- (₹)	Bank Name	State Bank of India
Branch Name	sinnar	DD Date	29-07-2017
Fee Paid Date	31-07-2017	Remark	

Seat Acceptance Details

ARC Seat Acceptance Status: Slide

Seat Acceptance Confirmation Details: Confirmed

Sr. No.	List of Submitted Documents Required at the time of verification at ARC.
1	Receipt of Online Payment
2	Valid GPAT Score card
3	Domicile Certificate of Candidate indicating that he/she is Domiciled in the State of Maharashtra
4	Caste / Tribe Validity Certificate issued by Caste / Tribe Certificate Scrutiny Committee
5	Caste Certificate stating that the caste is recognised under backward class category in Maharashtra
6	Certificate of the Indian Nationality of the candidate
7	Non-Creamy Layer Certificate valid upto 31st March 2018
8	Statement of marks obtained at 10th/SSC or its Equivalent Examination
9	Statement of marks obtained at 12th/HSC or its Equivalent Examination.

Date: 31-07-2017

Signature of The Candidate (SHELKE ARCHANA KHANDU)

Place :

ARC Use Only

Declaration : We hereby declare that, we are reporting this Candidate to our ARC for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2017 - 2018 on verification of Candidate's Identity. The Candidate has paid the Fees mentioned in this receipt. We also declare that the seat acceptance form of Candidate is confirmed in presence of the Candidate.

Seal of ARCS012
Confirmed On: 31-07-2017 10:02:02 AM
Printed On: 31-07-2017 10:02:04 AM
Last Modified On: 31-07-2017 10:02:02 AM
URL: http://mpharm17.dtemaharashtra.org/mpharm17/rc_reports.php/rc_reporting/admitreceipt?id=MTAyNDc5&md=MQ==

Signature of ARC Officer (ARCS012)
Confirmed By: ARCS012
Printed By: ARCS012
Last Modified By: ARCS012

Principal
Pravara Rural College of Pharmacy
Pravaranagar, A.P., Loni-431

https://mpharm17.dtemaharashtra.org/mpharm17/rc_reports.php/rc_reporting/admitreceipt?id=MTAyNDc5&md=MQ==

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PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

SHINDE MADHURI SITARAM

8/16/2017 Receipt-cum-Acknowledgement for Seat Acceptance for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) 2017-2018

State Common Entrance Test Cell, Maharashtra State, Mumbai
305, Government Polytechnic Building, 49, Jherwadi, Bandra (E), Mumbai 400051, (M.S.)
Receipt-cum-Acknowledgement of Seat Acceptance of CAP Round - III for Admission to First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2017 - 2018

Application ID : MPH17102920 Seat Acceptance Status Form Version : 1 Mode of Admission : Non Sponsored

Personal Details

Full Name	SHINDE MADHURI SITARAM	Gender	Female
Nationality	Indian	Annual Family Income (₹)	15,001 - 50,000
Date of Birth	02-01-1996	Applied For EBC	No
Category-Caste	OPEN		
Religious Minority/Linguistic Minority	N/A		
PWD Type	Not Applicable		
Type of Candidate	Maharashtra State Candidate - Type A		

Status of Provisional Allotment Details for CAP Round - III

Institute Allotted	5185-Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Course Allotted	Pharmaceutical Chemistry
Choice Code Allotted	5185R2210
Seat Type Allotted	GOVERNMENT
Seat No. Allotted	2

Seat Acceptance Fee

Payment Mode	DD	DD Number	454813
DD Amount	3000 (₹)	Bank Name	HDFC Bank
Branch Name	Pravara Sahakar Bank Loni	DD Date	16-08-2017
Fee Paid Date	16-08-2017	Remark	

Seat Acceptance Details

ARC Seat Acceptance Status:	Freeze
Seat Acceptance Confirmation Details:	Confirmed

List of Submitted Documents Required at the time of verification at ARC.

Sr. No.	1	Statement of marks obtained at 10th/SSC or its Equivalent Examination
2	Statement of marks obtained at 12th/HSC or its Equivalent Examination	
3	Certificate of the Indian Nationality of the candidate	
4	Domicile Certificate of Candidate indicating that he/she is Domiciled in the State of Maharashtra	
5	Caste Certificate stating that the caste is recognised under backward class category in Maharashtra	
6	Caste / Tribe Validity Certificate issued by Caste / Tribe Certificate Scrutiny Committee	
7	Receipt of Online Payment	
8	Valid GPAT Score card	

List of Not Submitted Documents Required at the time of verification at ARC

Sr. No.	1	Non-Creamy Layer Certificate valid upto 31st March 2018
---------	---	---

Date: 16-08-2017

Place: _____

Signature of The Candidate (SHINDE MADHURI SITARAM)

ARC Use Only

Declaration : We hereby declare that, we are reporting this Candidate to our ARC for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2017 - 2018 on verification of Candidate's Identity. The Candidate has paid the Fees mentioned in this receipt. We also declare that the seat acceptance form of Candidate is confirmed in presence of the Candidate.

Seal of ARCS012
Confirmed On: 16-08-2017 01:08:18 PM
Printed On: 16-08-2017 01:08:20 PM
Last Modified On: 16-08-2017 01:08:18 PM
URL: http://mpharm17.dtmaharashtra.org/mpharm17/rc_reports.php/rc_reporting/admitreceipt?id=M7A5OTW&md=M7A5OTW

Signature of ARC Officer (ARCS012)
Confirmed By: ARCS012
Printed By: ARCS012
Last Modified By: ARCS012

Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni- 413 736

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PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

SUVARNA BHAGWAT

State Common Entrance Test Cell, Maharashtra State, Mumbai
105, Government Polytechnic Building, 49, Kherwadi, Loni (E.S. Mumbai 400051, M.S.)
Receipt-cum-Acknowledgement of Institute Level Admission as Against CAP Vacancy for Admission to First
Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2017 - 2018

Application ID : MPH17102966

Personal Details :

Full Name	SHINDE SUVARNA BHAGWAT	Sponsorship Status	Not Sponsored
Nationality	Indian	Date of Birth	08-02-1995
Gender	Female	Annual Family Income (₹)	15,001 - 50,000
Category-Caste	OBC - Khatoli	Applied For EBC	No
PH Type	Not Applicable	Type of Candidature	Maharashtra State Candidates - Type A

B.Pharmacy Status : Passed

B.Pharmacy Details

B. Pharmacy University	Savitribai Phule Pune University
------------------------	----------------------------------

Examination :

Examination	Marks Obtained	Out of	Percentage
B.Pharmacy Final Year/Semester	3098	4800	64.54
12th/H.S.C. Aggregate	314	600	52.33
10th/S.S.C. Aggregate	459	550	83.45

Institute Details :

Institute Name	5185 - Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar, (Un-Aided - Non-Autonomous - Non-Minority)
Tuition Fees (₹)	5000/-
Development Fees (₹)	0/-
Other Fees (₹)	0/-
Total Fees (₹)	5000/-
Course Name	5185B(1910)-Pharmadegree
Admission Date	30-06-2017
Admission Type	Against CAP
Remark	Confirmed

Declaration by Candidate : I hereby agree to conform to rules, acts and laws referred by Government. I hereby undertake that so long as I am student of College/Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the institute/college will have rights to expel, rusticate me from the institute, for any transgression of the rules prescribed by the college/institute/university/Government and the undertaking given above.

Date: 30-06-2017

Place :

Signature of The Candidate
SHINDE SUVARNA BHAGWAT

Barcode

INSTITUTE USE ONLY

Declaration by the College/Institute : We hereby declare that we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2017-2018 on verification of Candidate's identity. The candidate has paid the fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar

Reported On: 30-06-2017 09:47:51 AM
Printed On: 30-06-2017 09:48:43 AM
Last Modified On: 30-06-2017 09:47:51 AM

Signature of Institute Officer (5185)

Principal

Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736

Principal

Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni- 413 736



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

TAMBE RUTUJA BHARAT

State Common Entrance Test Cell, Maharashtra State, Mumbai
305, Government Polytechnic Building, 49, Kherwadi, Bandra (E), Mumbai 400051. (M.S.)
Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of Two
Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2017 - 2018

Application ID: MPH17101739

Full Name: TAMBE RUTUJA BHARAT
Registration Number: 15-24-1993
Date of Birth: 15-24-1993
Category: OPEN
Religious Minority/Linguistic Minority: NA
Type of Candidate: Maharashtra State Candidate - Type A

Annual Family Income (₹): 55,001 - 1,00,000
Applied For EBC/99

State Level Roll Number: 1271
Admitted Choice Code: 118012610
Admitted Seat Type: GOVERNMENT
Preference No.: 1

Institute: Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Tuition Fee (₹): 0/-
Development Fee (₹): 6109/-
Other Fee (₹): 0/-
Total Fee (₹): 6109/-

Course: 518512410-Quality Assurance Techniques
Admission Date: 16-08-2017
Admission Type: CAP Round

Declaration by Candidate: I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of this college/institute, I will not behave in a manner which may result in suspending the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the Institute/College will have right to expel, suspend me from the Institute, for any transgression of the rules prescribed by the college/institute/university/government and the undertaking given above.

Date: 16-08-2017

Place: _____

Signature of The Candidate (TAMBE RUTUJA BHARAT)

INSTITUTE USE ONLY

Declaration by the College/Institute: We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2017 - 2018 on verification of Candidate's Identity. The candidate has paid the fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Reported On: 16-08-2017 09:23:46 AM
Printed On: 16-08-2017 09:23:46 AM
Last Modified On: 16-08-2017 09:23:46 AM
URL: http://m.pharm17.dtmsharpharm.org/mpharm17/institute_report.php/institute_reporting/admission/17
id=MTM0&id=MTM0

Signature of the Institute Officer (S165)
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413735
Last Modified By: S165

Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni- 413 735



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

TAMBE VARSHA NARAYAN

Mahatma Gandhi Vidyamandir's PHARMACY COLLEGE  PRINCIPAL	Full Name : <u>Tambe Varsha Narayan</u> Permanent Address : <u>At/P-chandrapur tal-Rahata, Dist-Ahmednagar</u> Local Address : <u>Tulsai Park, Kamatwada, Nashik</u> Class : <u>M.Pharm</u> Year : <u>1st</u> Roll No. : <u>38</u> Lib. No. : <u>411</u> Date of Birth : <u>01 Jan 1996</u> Date of Admission : <u>18 Aug. 2018</u> Blood Group : <u>B+ve</u> I Card Valid upto : <u>30th June 2021</u> <u>Varsha</u> Sign of Student <u>Q</u> Librarian
--	---



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

THE TE SANKET BALASAHEB

 State Common Entrance Test Cell, Maharashtra State, Mumbai
305, Government Polytechnic Building, 49, Kherwadi, Dandara (E), Mumbai 400051. (M.S.)
Receipt cum Acknowledgement of Institute Reporting for Admission to First Year Of Two
Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2017 - 2018

Application ID : MPH17102419 Mode of Admission : Non Sponsored

Personal Details	
Full Name	THE TE SANKET BALASAHEB
Nationality	Indian
Gender	Male
Date of Birth	12-06-1996
Annual Family Income (₹)	15,001 - 50,000
Category-Caste	OBC -Kandh Maratha
Applied For EBC	No
Religious Minority/Linguistic Minority	N.A.
PWD Type	Not Applicable
Type of Candidature	Maharashtra State Candidate - Type A



Admission Details	
State Level Merit Number	2059
Allotted Choice Code	518582210
Allotted Seat Type	GOBC
Preference No.	2

Reporting Details

Institute	
Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar	
Tuition Fees (₹)	2/-
Development Fees (₹)	1109/-
Other Fees (₹)	0/-
Total Fees (₹)	1109/-
Remark	confirmed

Course: 518582210-Pharmaceutical Chemistry
Admission Date: 16-08-2017
Admission Type: CAP Round

Declaration by Candidate : I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the institute/college will have rights to expel, rusticate me from the institute, for any infraction of the rules prescribed by the college/institute/university/Government and the undertaking given above.

Date: 16-08-2017

Place: _____

Signature of The Candidate
(THE TE SANKET BALASAHEB)



INSTITUTE USE ONLY

Declaration by the College/Institute : We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2017 - 2018 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of: Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Reported On: 16-08-2017 09:44:24 AM
Printed On: 16-08-2017 09:44:26 AM
Last Modified On: 16-08-2017 09:44:24 AM
URL: http://mpharm17.dtemaharashtra.org/mpharm17/institute_report.php/institute_reporting/admitreceipt?is=HTQ&md=Mw==

Signature of Institute Officer (5185)
Principal
Pravara Rural College of Pharmacy,
Pravaranagar, A.P. Loni-431736


Principal
Pravara Rural College of Pharmacy
Pravaranagar, A.P. Loni- 431736



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

TUPE RUTUVARNA EKNATH

State Common Entrance Test Cell, Maharashtra State, Mumbai
305, Government Polytechnic Building, 49, Kherwadi, Bandra (E), Mumbai 400051 (M.S.)
Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of Two
Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2017 - 2018

Application ID : MPH1701859 Mode of Admission : Not Sponsored

Personal Details	
Full Name	TUPE RUTUVARNA EKNATH
Nationality	Indian
Date of Birth	20-02-1993
Category-Caste	SC - Chamar
Religious Minority/Linguistic Minority	N/A
PWD Type	Not Applicable
Type of Candidate	Maharashtra State Candidate - Type A
Gender	Male
Annual Family Income (₹)	15,001 - 50,000
Applied for EBC	No

State Level Merit Number: 2150
Allotted Choice Code: S18512810
Allotted Seat Type: GSC
Preference No: 1

Reporting Details	
Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Tuition Fees (₹)	0/-
Development Fees (₹)	0/-
Other Fees (₹)	0/-
Total Fees (₹)	0/-
Course	518512610-Quality Assurance Techniques
Admission Date	16-08-2017
Admission Type	CAP Round

Remark: confirmed

Declaration by Candidate: I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the Institute/College will have rights to expel, rusticate me from the Institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

Date: 16-08-2017

Signature of The Candidate (TUPE RUTUVARNA EKNATH)

Place:

INSTITUTE USE ONLY

Declaration by the College/Institute: We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2017 - 2018 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Reported On: 16-08-2017 09:52:04 AM
Printed On: 16-08-2017 09:52:04 AM
Last Modified On: 16-08-2017 09:52:04 AM
URL: http://mpharm17.dte.maharashtra.org/mpharm17/institute_report.php/institute_reporting/admitreceipt?id=MTQ0&id=116

Signature of Institute Officer (5185)
Principal
Pravara Rural College of Pharmacy
Pravaranagar, Alp, Dist-413736
Last Modified By: 5185

Signature of Principal
Principal
Pravara Rural College of Pharmacy
Pravaranagar, Alp, Loni- 413 736



**PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI**

UDAGE VIKAS ASHOK



State Common Entrance Test Cell, Maharashtra State, Mumbai
305, Government Polytechnic Building, 49, Kherwadi, Bandra (E), Mumbai 400051. (M.S.)
Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of Two
Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2017 - 2018

Application ID : MPH17103209		Mode of Admission : Non Sponsored	
Personal Details			
Full Name	UDAGE VIKAS ASHOK		
Nationality	Indian	Gender	Male
Date of Birth	01-01-1996	Annual Family Income (₹)	15,001 - 50,000
Category-Caste	OBC - Kunbi	Applied For EDC	No
Religious Minority/Linguistic Minority	N.A.		
PWD Type	Not Applicable		
Type of Candidature	Maharashtra State Candidate - Type A		
Allotment Details			
State Level Merit Number 792			
Allotted Choice Code 518512610			
Allotted Seat Type OPEN			
Preference No. 1			
Reporting Details			
Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar		
Tuition Fees (₹)	0/-	Course	518512610-Quality Assurance Techniques
Development Fees (₹)	8545/-	Admission Date	16-08-2017
Other Fees (₹)	0/-	Admission Type	CAP Round
Total Fees (₹)	8545/-		
Remark	confirmed		

Declaration by Candidate : I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the Institute/college will have rights to expel, rusticate me from the Institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

Date: 16-08-2017

Place :

Signature of The Candidate
(UDAGE VIKAS ASHOK)



INSTITUTE USE ONLY

Declaration by the College/Institute : We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2017 - 2018 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar

Reported On: 16-08-2017 10:06:02 AM

Printed On: 16-08-2017 10:06:06 AM

Last Modified On: 16-08-2017 10:06:02 AM

URL: http://mpharm17.dtemaharashtra.org/mpharm17/institute_report.php/institute_reporting/admitreceipt?

id=MTUw&md=MQ==

Signature of Institute Officer (5185)

Principal

Pravara Rural College of Pharmacy

Pravaranagar, A/p. Loni-413 736

Printed By: 5185

Principal

Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413 736



PRAVARA RURAL EDUCATION SOCIETY'S

PRAVARA RURAL COLLEGE
OF PHARMACY

LONI

VARADE PRIYANKA RAMRAO

State Common Entrance Test Cell, Maharashtra State, Mumbai
305, Government Polytechnic Building, 49, Kherwadi, Bandra (E), Mumbai 400051. (M.S.)
Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of Two
Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2017 - 2018

Application ID: MPH17101099 Mode of Admission: Non Sponsored

Full Name: VARADE PRIYANKA RAMRAO	
Nationality: Indian	Gender: Female
Date of Birth: 04-10-1995	Annual Family Income (₹): 15,001 - 50,000
Category-Caste: NT 3 (NT-D) - Vajant	Applied For EBC: Yes
Religious Minority/Linguistic Minority: N.A.	
PWD Type: Not Applicable	
Type of Candidature: Maharashtra State Candidate - Type A	

State Level Merit Number: 2491
Allotted Choice Code: 518502210
Allotted Seat Type: GOFENS
Preference No.: 1

Reporting Details

Institute: Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar	
Tuition Fees (₹): 0/-	Course: 518502210-Pharmaceutical Chemistry
Development Fees (₹): 0/-	Admission Date: 16-08-2017
Other Fees (₹): 0/-	Admission Type: CAP Round
Total Fees (₹): 0/-	
Remark: Confirmed	

Declaration by Candidate: I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the Institute/college will have rights to expel, rusticate me from the Institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

Date: 16-08-2017

Place: _____

Signature of The Candidate (VARADE PRIYANKA RAMRAO)

Barcode

INSTITUTE USE ONLY

Declaration by the College/Institute: We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2017 - 2018 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar

Reported On: 16-08-2017 09:50:14 AM
Printed On: 16-08-2017 09:50:17 AM
Last Modified On: 16-08-2017 09:50:14 AM
JRL: http://mpharm17.dtemaharashtra.org/mpharm17/institute_report.php/institute_reporting/admireceipt/
d=MTQz&md=MQ==

Signature of Institute Officer (5185)

Principal

Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736

Principal

Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736



PRAVARA RURAL EDUCATION SOCIETY'S

PRAVARA RURAL COLLEGE
OF PHARMACY

LONI

VIKHE JYOTI JAGANNATH

 State Common Entrance Test Cell, Maharashtra State, Mumbai
305, Government Polytechnic Building, 49, Kherwadi, Bandra (E), Mumbai 400051. (M.S.)
Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of Two
Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2017 - 2018

Application ID : MPH17181698

Mode of Admission : Non Sponsored

Personal Details	
Full Name	VIKHE JYOTI JAGANNATH
Nationality	Indian
Date of Birth	20-11-1995
Gender	Female
Category-Caste	OPEN
Annual Family Income (₹)	15,001 - 50,000
Religious Minority/Linguistic Minority	N.A
Applied For EBC	No
PWD Type	Not Applicable
Type of Candidature	Maharashtra State Candidate - Type A

Admission Details

State Level Merit Number	2186
Allotted Choice Code	518582210
Allotted Seat Type	OPENS
Provisional No.	2

Reporting Details

Institute	
Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar	
Tuition Fees (₹)	0/-
Development Fees (₹)	5109/-
Other Fees (₹)	0/-
Total Fees (₹)	5109/-
Remark	confirmed

Course: 518582210-Pharmaceutical Chemistry

Admission Date: 16-08-2017

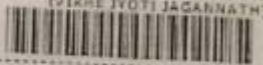
Admission Type: CAP Round

Declaration by Candidate: I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the Institute/College will have rights to expel, rusticate me from the Institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

Date: 16-08-2017

Place:

Signature of The Candidate
(VIKHE JYOTI JAGANNATH)



INSTITUTE USE ONLY

Declaration by the College/Institute: We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2017 - 2018 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar

Reported On: 16-08-2017 09:25:16 AM

Printed On: 16-08-2017 09:38:15 AM

Last Modified On: 16-08-2017 09:25:16 AM

URL: http://mpharm17.dte.maharashtra.org/mpharm17/institute_report.php/institute_reporting/adm/receipt?id=MPH17181698

Signature of Institute Officer (5185)
Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni- 413 736

Signature of Principal
Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni- 413 736



PRAVARA RURAL EDUCATION SOCIETY'S

PRAVARA RURAL COLLEGE
OF PHARMACY

LONI

BAIRAGI SHUBHAM GOKUL

8/8/2017 Receipt-cum-Acknowledgement for Seat Acceptance for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) 2017

State Common Entrance Test Cell, Maharashtra State, Mumbai
305, Government Polytechnic Building, 49, Kherwadi, Bandra (E), Mumbai 400051. (M.S.)
Receipt-cum-Acknowledgement of Seat Acceptance of CAP Round - II for Admission to First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2017 - 2018

Application ID : MPH17103103 Seat Acceptance Status Form Version : 1 Mode of Admission : Non Sponsored

Personal Details

Full Name	BAIRAGI SHUBHAM GOKULDAS	Gender	Male
Nationality	Indian	Annual Family Income (₹)	15,001 - 50,000
Date of Birth	24-05-1996	Applied For EBC	No
Category-Caste	NT 1 (NT-B) - Bairagi	Religious Minority/Linguistic Minority	N/A
PWD Type	Not Applicable	Type of Candidature	Maharashtra State Candidate - Type A

Status of Provisional Allotment Details for CAP Round - II

Institute Allotted	185-Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Course Allotted	Pharmaceutical Chemistry
Choice Code Allotted	18582210
Seat Type Allotted	GVDT
Prof No Allotted	2

Seat Acceptance Fee

Payment Mode	DD	DD Number	454716
DD Amount	5000 /- (₹)	Bank Name	HDFC Bank
Branch Name	Loni Bk	DD Date	08-07-2017
Fee Paid Date	08-08-2017	Remark	

Seat Acceptance Details

ARC Seat Acceptance Status: Freeze

Seat Acceptance Confirmation Details: Confirmed

List of Submitted Documents Required at the time of verification at ARC.

Sr. No.	Document
1	Statement of marks obtained at 10th/SSC or its Equivalent Examination
2	Statement of marks obtained at 12th/HSC or its Equivalent Examination.
3	Certificate of the Indian Nationality of the candidate
4	Domicile Certificate of Candidate indicating that he/she is Domiciled in the State of Maharashtra
5	Caste Certificate stating that the caste is recognised under backward class category in Maharashtra
6	Caste / Tribe Validity Certificate issued by Caste / Tribe Certificate Scrutiny Committee
7	Non-Creamy Layer Certificate valid upto 31st March 2018
8	Receipt of Online Payment
9	Valid GPAT Score card

Date: 08-08-2017

Place :

ARC Use Only

Declaration : We hereby declare that, we are reporting this Candidate to our ARC for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2017 - 2018 on verification of Candidate's Identity. The Candidate has paid the Fees mentioned in this receipt. We also declare that the seat acceptance form of Candidate is confirmed in presence of the Candidate.

Seal of ARCS012
Confirmed On: 08-08-2017 10:54:30 AM
Printed On: 08-08-2017 10:54:32 AM
Last Modified On: 08-08-2017 10:54:30 AM
URL: http://mpharm17.dtemaharashtra.org/mpharm17/rc_reports.php/rc_reporting/admitreceipt?id=MTAzMtAz&md=Mg==

Signature of ARC Officer (ARCS012)
Confirmed By: ARCS012
Printed By: ARCS012
Last Modified By: ARCS012

Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p

Pravara Rural College of Pharmacy
Pravaranagar, A/p
443736
ARC
5012

https://mpharm17.dtemaharashtra.org/mpharm17/rc_reports.php/rc_reporting/admitreceipt?id=MTAzMtAz&md=Mg==



PRAVARA RURAL EDUCATION SOCIETY'S

PRAVARA RURAL COLLEGE
OF PHARMACY

LONI

ANDHALE KAJAL PANDITRAO

State Common Entrance Test Cell, Maharashtra State, Mumbai
305, Government Polytechnic Building, 49, Kheswadi, Bandra(E), Mumbai 400051.(M.S.)
Receipt-cum-Acknowledgement of Institute Reporting of for Admission to First Year Of Two Year Full
Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2016 - 2017

Application ID: HPH16100940

Personal Details

Full Name	ANDHALE KAJAL PANDITRAO
Nationality	Indian
Date of Birth	12-08-1991
Gender	Female
Category-Caste	NT 3 (NT-D) -Vajeri
Annual Family Income (₹)	50,001 - 1,00,000
Religious Minority/Linguistic Minority	N.A
Applied For EBC	No
PWD Type	Not Applicable
Type of Candidature	Maharashtra State Candidate - Type A

Allotment Details

State Level Merit Number	2282
Allotted Choice Code	518512610
Allotted Seat Type	GNTD
Preference No.	1

Reporting Details

Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Tuition Fees (₹)	0/-
Development Fees (₹)	9505/-
Other Fees (₹)	0/-
Total Fees (₹)	9505/-
Course	518512610-Quality Assurance Techniques
Admission Date	12-08-2016
Admission Type	CAP Round

Remark: confirmed

Declaration by Candidate: I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the Institute/college will have rights to expel, rusticate me from the Institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

Date: 12-08-2016

Place: _____

Signature of The Candidate
(ANDHALE KAJAL PANDITRAO)

INSTITUTE USE ONLY

Declaration by the College/Institute: We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2016 - 2017 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Reported On: 13-08-2016 10:39:51 AM
Printed On: 13-08-2016 10:39:51 AM
Last Modified On: 13-08-2016 10:39:51 AM
URL: http://mpharm16.dtemaharashtra.org/mpharm16/institute_report.php/institute_reporting/admitrecelp7id=NTMw&rand=MQ==

Signature of Institute Officer (S185)

Reported By: S18
Printed By: S18
Last Modified By: S18

Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736



PRAVARA RURAL EDUCATION SOCIETY'S

PRAVARA RURAL COLLEGE
OF PHARMACY

LONI

CHAVAN KRUSHNABI RAJENDRA

NO.: 17. 0153874

SAVITRIBAI PHULE PUNE UNIVERSITY
(formerly University of Pune)
GANESHKHIND, PUNE 411 007.



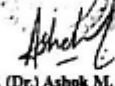
Passing Certificate

This is to certify that -

Smt. CHAVAN KRUSHNABI RAJENDRA Mother's Name:-ALKAN
has appeared for the MASTER OF PHARMACY (Rev.2015) PHARMACEUTICS
examination held in month of June 2018 and declared to have passed
the examination with 'O' grade.

This is further to certify that she is eligible for
the aforesaid Degree Certificate, whenever she applies for the same
at the University Convocation.

Seat No. : 10617
P.R.No. : 2451600406
College code: 1216


Prof. (Dr.) Ashok M. Chavan
Director,
Board of Examinations & Evaluation

DATE: 29 JUNE 2018



Principal

Principal

Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413726



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

CHOUHAN PARMINDER KAUR



State Common Entrance Test Cell, Maharashtra State, Mumbai
305, Government Polytechnic Building, 49, Kherwadi, Bandra (E), Mumbai 400051. (M.S.)
Revised Provisional Allotment for CAP Round - II for Admission to First Year Of Two Year Full
Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2016 - 2017
Published On : 06-08-2016 at 03:00 PM

Application ID : MPH16101155 GPAT Score: 61			
Personal Details			
Full Name	CHOUHAN PARMINDERKAUR PREMPALSINGH		
Gender	Female	Date of Birth	07-01-1995
Category-Caste	OPEN -Open		
PWD Type	Not Applicable		
Religious Minority	N.A.		
Linguistic Minority	N.A.		
Type of Candidature	Maharashtra State Candidate - Type A		
Qualification Details			
Examination	Obtained	Percentage	
B.Pharmacy Aggregate :	829/1200	69.08	
Merit Details			
State Level General Merit No.	1557		
Status of Provisional Allotment Details for CAP Round - II			
Choice Code Alloted	636312610		
Institute	Sinhgad Institute of Pharmacy, Narhe(Ambegaon), Pune		
Course	Quality Assurance Techniques		
Seat Type	GOPEN	Preference No. Alloted	3
IMPORTANT INSTRUCTIONS :			
• The Candidate is required to provide Application ID and Password at the time of Seat acceptance at ARC. • The Candidate is required to submit all the original documents mention on Receipt-Cum Acknowledgement of Application Form. • ARC should verify the documents which are listed in Candidate's Receipt-Cum-Acknowledgement			
☐			
Printed On: 27-11-2017 11:07:29 AM		Printed By: MPH16101155	
URL: http://mpharm16.dtemaharashtra.org/mpharm15/index.php/allotment/displayallotment?id=MTAxMTU1&rnd=Mg==			

Warning: mkdir(): Permission denied in
/home/mpharm16dtemahar/public_html/mpharm16/model/a_master_model.php on line 204

Warning: fopen(/home/mpharm16dtemahar/public_html/mpharm16/mysqllog/11_2017/27_11_2017.txt): failed to
open stream: No such file or directory in
/home/mpharm16dtemahar/public_html/mpharm16/model/a_master_model.php on line 213

Warning: fwrite() expects parameter 1 to be resource, boolean given in
/home/mpharm16dtemahar/public_html/mpharm16/model/a_master_model.php on line 216



Prin
PRINCIPAL
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

DALE ANKITA RAJENDRA

State Common Entrance Test Cell, Maharashtra State, Mumbai
305, Government Polytechnic Building, 49, Kherwadi, Bandra (E), Mumbai 400051. (M.S.)
Receipt-cum-Acknowledgement of Institute Reporting of for Admission to First Year Of Two Year Full
Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2016 - 2017

Application ID : MPH16101646

Personal Details	
Full Name	DALE ANKITA RAJENDRA
Nationality	Indian
Date of Birth	26-04-1994
Category-Caste	OPEN - Open
Religious Minority /Linguistic Minority	N.A
FWD Type	Not Applicable
Type of Candidature	Maharashtra State Candidate - Type A
Allotment Details	
State Level Merit Number	504
Allotted Choice Code	518592210
Allotted Seat Type	OPEN
Preference No.	I
Reporting Details	
Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Tuition Fees (₹)	1810/-
Development Fees (₹)	6140/-
Other Fees (₹)	0/-
Total Fees (₹)	7950/-
Remark	confirmed
Course	518582210-Pharmaceutical Chemistry
Admission Date	12-08-2016
Admission Type	CAP Round

Declaration by Candidate : I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the institute/college will have rights to expel, rusticate me from the institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

Date: 13-08-2016

Place :

INSTITUTE USE ONLY

Declaration by the College/Institute : We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2016 - 2017 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Signature of The Candidate
(DALE ANKITA RAJENDRA)

Signature of Institute Officer (5185)

Reported By: 5185
Printed By: 5185
Last Modified By: 5185

of Pravara Rural Education Society's Pravara Rural College of
Pharmacy, Pravaranagar
Reported On: 13-08-2016 09:55:15 AM
Printed On: 13-08-2016 09:55:17 AM
Last Modified On: 13-08-2016 09:55:15 AM
URL: http://mpharm16.dtemaharashtra.org/mpharm16/institute_report.php/institute_reporting/admitreceipt?id=NDg5&md=MQ==


Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736



PRAVARA RURAL EDUCATION SOCIETY'S

PRAVARA RURAL COLLEGE
OF PHARMACY

LONI

GHOHARE KIRAN VIJAY

State Common Entrance Test Cell, Maharashtra State, Mumbai
305, Government Polytechnic Building, 49, Kherwadi, Bandra (E), Mumbai 400051. (M.S.)
Provisional Allotment for CAP Round - 1 for Admission to First Year Of Two Year Full Time Post-Graduate
Course In Pharmacy (M. Pharm.) for the year 2016 - 2017
Published On: 29-07-2016 at 06:00 PM

Application ID : MPH16100049 GPAT Score: 48

Personal Details		
Full Name	GHOHARE KIRAN VIJAY	Date of Birth
Gender	Male	02-03-1995
Category-Caste	Other - Mah (182)	
PWD Type	Not Applicable	
Religious Minority	N.A.	
Linguistic Minority	N.A.	
Type of Candidature	Maharashtra State Candidate - Type A	

Qualification Details		Percentage
Examination	Obtained	65.67
B.Pharmacy Aggregate :	788/1200	

Merit Details	
State Level General Merit No.	1978

Status of Provisional Allotment Details for CAP Round - 1

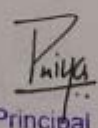
Choice Code Alloted	518582210		
Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar		
Course	Pharmaceutical Chemistry		
Seat Type	GOBC	Preference No. Alloted	2

IMPORTANT INSTRUCTIONS :

- The Candidate is required to provide Application ID and Password at the time of Seat acceptance at ARC.
- The Candidate is required to submit all the original documents mention on Receipt-Cum Acknowledgement of Application Form.
- ARC should verify the documents which are listed in Candidate's Receipt-Cum-Acknowledgement

Printed On: 11-08-2016 02:41:27 PM Printed By: MPH16100049

URI : <http://www.maharashtra.org/mpharm16/index.php/allotment/displayallotment?id=MTAwMDQ5&rnd=MQ==>


Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736



PRAVARA RURAL EDUCATION SOCIETY'S

PRAVARA RURAL COLLEGE
OF PHARMACY

LONI

JADAV ARTI MHATARDEO

State Common Entrance Test Cell, Maharashtra State, Mumbai
305, Government Polytechnic Building, 49, Sherwadi, Bandra (E), Mumbai 400051. (M.S.)
Provisional Allotment for CAP Round - 1 for Admission to First Year Of Two Year Full Time Post-Graduate
Course In Pharmacy (M. Pharm.) for the year 2016 - 2017
Published On: 29-07-2016 at 06:00 PM

Application ID : MPH16100636 GPAF Score: 50

Personal Details

Full Name	JADAV ARTI MHATARDEO	Date of Birth	16-10-1994
Gender	Female		
Category/Caste	SC - Chandhar (11)		
PWD Type	Not Applicable		
Religious Minority	N.A.		
Linguistic Minority	N.A.		
Type of Candidature	Maharashtra State Candidate - Type A		

Examination

B. Pharmacy Aggregate :	Obtained	Percentage
	816/1200	67.5

Merit Details

State Level General Merit No.	1902
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Status of Provisional Allotment Details for CAP Round - 1

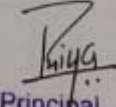
Choice Code Allotted	518582210		
Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar		
Course	Pharmaceutical Chemistry		
Seat Type	GSC	Preference No. Allotted	1

IMPORTANT INSTRUCTIONS :

- The Candidate is required to provide Application ID and Password at the time of Seat acceptance at ARC.
- The Candidate is required to submit all the original documents mention on Receipt-Cum Acknowledgement of Application.
- Candidates should verify the documents which are listed in Candidate's Receipt-Cum-Acknowledgement.

Printed On: 10-08-2016 10:12:36 AM Printed By: MPH16100636

URL: <http://mpharm16.dte.maharashtra.org/mpharm16/index.php/allotment/displayallotment?id=MTAwNjM2&md=MQ==>


Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736



**PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI**

JOSHI ASHVINI VILAS

 State Common Entrance Test Cell, Maharashtra State, Mumbai
305, Government Polytechnic Building, 49, Kherwadi, Bandra (E), Mumbai 400051. (M.S.)
Receipt-cum-Acknowledgement of Institute Reporting of for Admission to First Year Of Two Year Full
Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2016 - 2017

Application ID : MPH16100946

Personal Details	
Full Name	JOSHI ASHVINI VILAS
Nationality	Indian
Date of Birth	18-09-1994
Category-Caste	NT 2 (NT-C)-Dhangar
Religious Minority/Linguistic Minority	N.A.
PWD Type	Not Applicable
Type of Candidature	Maharashtra State Candidate - Type A
Gender	Female
Annual Family Income (₹)	15,001 - 50,000
Applied For EBC	No



Allotment Details	
State Level Merit Number	894
Allotted Choice Code	518582210
Allotted Seat Type	GD/PH
Preference No.	1

Reporting Details	
Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Course	518582210-Pharmaceutical Chemistry
Tuition Fees (₹)	0/-
Development Fees (₹)	2690/-
Other Fees (₹)	0/-
Total Fees (₹)	2690/-
Admission Date	12-08-2016
Admission Type	CAP Round

Remark: confirmed

Declaration by Candidate : I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the Institute/college will have rights to expel, suspend me from the Institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

Date: 13-08-2016

Signature of The Candidate
(JOSHI ASHVINI VILAS)

Place



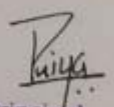
INSTITUTE USE ONLY

Declaration by the College/Institute : We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2016 - 2017 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Signature of Institute Officer (5185)

Reported By: 5185
Printed By: 5185
Last Modified By: 5185

URL: http://m pharm16.dtemaharashtra.org/m pharm16/institute_report.php/institute_reporting/admitreceipt?id=HDKz&md=HJQ==


Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

JOSHI SHRADDHA DATTATRYA

State Common Entrance Test Cell, Maharashtra State, Mumbai
305, Government Polytechnic Building, 49, Kherwadi, Bandra (E), Mumbai 400051. (M.S.)
Receipt-cum-Acknowledgement of Institute Reporting of for Admission to First Year Of Two Year Full
Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2016 - 2017

Location ID: MPH16100970

Personal Details	
Full Name	JOSHI SHRADDHA DATTATRYA
Nationality	Indian
Date of Birth	18-08-1994
Gender	Female
Category-Caste	NT 2 (NT-E) -Dhangar
Annual Family Income (₹)	15,001 - 50,000
Religious Minority/Linguistic Minority	N/A
Applied For EBC	No
PWD Type	Not Applicable
Type of Candidature	Maharashtra State Candidate - Type A
Allotment Details	
State Level Merit Number	517
Allotted Choice Code	518582210
Allotted Seat Type	GOPEH
Preference No.	1
Reporting Details	
Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Tuition Fees (₹)	0/-
Development Fees (₹)	1690/-
Other Fees (₹)	0/-
Total Fees (₹)	1690/-
Remark	confirmed
Course	518582210-Pharmaceutical Chemistry
Admission Date	12-08-2016
Admission Type	CAP Round

Declaration by Candidate : I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the institute/college will have rights to expel, rusticate me from the institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

Date: 12-08-2016

Place

Signature of The Candidate
(JOSHI SHRADDHA DATTATRYA)

INSTITUTE USE ONLY

Declaration by the College/Institute : We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2016 - 2017 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Signature of Institute Officer (5185)

Reported On: 13-08-2016 09:56:47 AM
Printed On: 13-08-2016 09:56:49 AM
Last Modified On: 13-08-2016 09:56:47 AM
URL: http://mpharm16.dreamaharashtra.org/mpharm16/institute_report.php/institute_reporting/admitreceipt?id=NDky&mid=MQ

Reported By: 518
Printed By: 518
Last Modified By: 518

Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

KADU SHEHA VENUNATH

Receipt-cum-Acknowledgement for First Year Of Two Year Full Time Post Graduate Course in Pharmacy (M. Pharm.) 2016 - 2017

State Common Entrance Test Cell, Maharashtra State, Mumbai
305, Government Polytechnic Building, 59, Kherwadi, Bandra (E), Mumbai 400051 (M.S.)
Receipt-cum-Acknowledgement of Institute Reporting of for Admission to First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2016 - 2017

Registration ID: MPH16101876

Personal Details

Full Name	KADU SHEHA VENUNATH	Gender	Female
Nationality	Indian	Annual Family Income (₹)	8,50,000 - 9,00,000
Date of Birth	21-03-1993	Applied for EBC	No
Category/Caste	OPEN - OBC		
Religious Minority/Linguistic Minority	N/A		
PWD Type	Not Applicable		
Type of Candidature	Maharashtra State Candidate - Type A		

Admission Details

State Level Merit Number	1594
Allotted Choice Code	322912515
Allotted Seat Type	GOVERN
Preference No.	1

Reporting Details

Institute	Dr. L. H. Hiranandani College of Pharmacy, Ujhasnagar	Course	322912515-Quarry Assurance
Tuition Fees (₹)	50000/-	Admission Date	12-08-2016
Development Fees (₹)	0/-	Admission Type	CAP Round
Other Fees (₹)	0/-		
Total Fees (₹)	50000/-		

Remark

Declaration by Candidate: I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of this College/Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand the Principal/Director of the institute/college will have rights to expel, suspend me from the institute, for any infringement of the rules prescribed by college/institute/university/Government, and the undersigned given above.

Date: 26-08-2016

Signature of The Candidate
KADU SHEHA VENUNATH

Place

INSTITUTE USE ONLY

Declaration by the College/Institute: We hereby declare that, we are admitting this Candidate to our College/Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2016 - 2017 on verification of Candidate's Identity. We also declare that the admission of Candidate is confirmed in presence of Candidate.

Signature of Institute Office

Reported & Printed

Last Modified

Seal of Dr. L. H. Hiranandani College of Pharmacy, Ujhasnagar

Reported On: 13-08-2016 03:08:24 PM

Printed On: 26-08-2016 05:34:03 PM

Last Modified On: 13-08-2016 03:08:24 PM

URL: http://mpharm16.dtemaharashtra.org/mpharm16/institute_report.php/institute_reporting/adm/treceipt?id=MTG1hQ==&md=8U

Principal

Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni- 413 736



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

KHARDE RAHUL KESHAV

State Common Entrance Test Cell, Maharashtra State, Mumbai

State Common Entrance Test Cell, Maharashtra State, Mumbai
305, Government Polytechnic Building, 49, Kherwadi, Bandra (E), Mumbai 400051. (M.S.)
Provisional Allotment for CAP Round - IV for Admission to First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2016 - 2017

Application ID : MPH16100075 | GPAT Score: 58

Personal Details			
Full Name	KHARDE RAHUL KESHAV		
Gender	Male	Date of Birth	07-10-1993
Category-Caste	OPEN -Open		
PWD Type	Not Applicable		
Religious Minority	N.A.		
Linguistic Minority	N.A.		
Type of Candidature	Maharashtra State Candidate - Type A		

Qualification Details		Percentage
Examination	Obtained	
B.Pharmacy Aggregate :	741/1200	61.75

State Level General Merit No. 1670

Status of Provisional Allotment Details for CAP Round - IV

Choice Code Allotted	518512610		
Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar		
Course	Quality Assurance Techniques		
Seat Type	GVJDT	Preference No. Allotted	1

IMPORTANT INSTRUCTIONS :

- The Candidate is required to provide Application ID and Password at the time of Seat acceptance at ARC.
- The Candidate is required to submit all the original documents mention on Receipt-Cum Acknowledgement of Application Form.
- ARC should verify the documents which are listed in Candidate's Receipt-Cum-Acknowledgement

Printed On: 12-08-2016 09:27:24 AM | Printed By: MPH16100075

URL: <http://mpharm16.dtemaharashtra.org/mpharm16/index.php/allotment/displayallotment?id=MTAwMDc1&md=NA==&log=1>

Piya
Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

KOLEKAR ARCHANA KANIFNATH

State Common Entrance Test Cell, Maharashtra State, Mumbai
305, Government Polytechnic Building, 49, Kherwadi, Bandra (E), Mumbai 400051. (M.S.)
Receipt-cum-Acknowledgement of Institute Reporting of for Admission to First Year Of Two Year Full
Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2016 - 2017

Application ID : MPH16101639

Personal Details

Full Name	KOLEKAR ARCHANA KANIFNATH		
Nationality	Indian		
Date of Birth	23-06-1995	Gender	Female
Category-Caste	NT 2 (NT-C)-Changar	Annual Family Income (₹)	6,00,001 - 8,00,000
Religious Minority/Linguistic Minority	N.A	Applied For EBC	No
PWD Type	Not Applicable		
Type of Candidature	Maharashtra State Candidate - Type A		

Allotment Details

State Level Merit Number	1276
Allotted Choice Code	S18512610
Allotted Seat Type	GOPIH
Preference No.	1

Reporting Details

Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar		
Tuition Fees (₹)	0/-	Course	S18512610- Quality Assurance Techniques
Development Fees (₹)	6140/-	Admission Date	12-08-2016
Other Fees (₹)	0/-	Admission Type	CAP Round
Total Fees (₹)	6140/-		
Remark	confirmed		

Declaration by Candidate : I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the institute/college will have rights to expel, rusticate me from the institute, for any infringement of the rules prescribed by the University/Institute/University/Government and the undertaking given above.

Date: 13-08-2016

Place :

Signature of The Candidate
(KOLEKAR ARCHANA KANIFNATH)

INSTITUTE USE ONLY

Declaration by the College/Institute : We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2016 - 2017 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

of Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar

Reported On: 13-08-2016 10:14:32 AM
Printed On: 13-08-2016 10:14:33 AM
Last Modified On: 13-08-2016 10:14:32 AM
URL: http://mpharm16.dcmaharashtra.org/mpharm16/institute_report.php/institute_reporting/admitreceipt?id=NTAz&md=MQ==

Signature of Institute Officer (S185)

Reported By: S185
Printed By: S185
Last Modified By: S185

Principal
Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736



PRAVARA RURAL EDUCATION SOCIETY'S

PRAVARA RURAL COLLEGE
OF PHARMACY

LONI

NAWATHE GANESH KISHAN

NO.: 19 - 0006112

SAVITRIBAI PHULE PUNE UNIVERSITY
(formerly University of Pune)
GANESHKHIND, PUNE 411 007.

STATEMENT OF GRADES FOR MASTER OF PHARMACY (Rev.2013) PHARMACEUTICAL CHEMISTRY

SEAT NO. 10463 CENTRE 6 PERM REG. NO.: 2421700465
NAME GANESH KISHAN NAWATHE MOTHER : SUNANDA
COLLEGE OS07 PDVVP COP AHMEDNAGAR

YEAR : JUNE 2019

SEM.	NAME OF THE COURSE	INT	UEX	TOT	CRE- DITS	GR- ADE	GP
1	ADVANCED ANALYTICAL TECHNIQUES	27	29	56	P 04	B+	028
	ADVANCED ANALYTICAL TECHNIQUES (PRACTICAL)	38	33	71	P 04	A+	036
	RESEARCH METHODOLOGY	32	27	59	P 04	B+	028
	BIOPHARMACEUTICS AND PHARMACOKINETICS	35	22	57	P 03	B+	021
	ADVANCED PHARMACEUTICAL CHEMISTRY	31	29	60	P 04	A	032
	ADVANCED PHARMACEUTICAL CHEMISTRY (PRACTICAL)	37	35	72	P 04	A+	036
	SEMINAR	34	-	34	P 02	A	016
2	DRUG REGULATORY AFFAIRS	33	20	53	P 04	B	024
	ADVANCED MEDICINAL CHEMISTRY	31	21	52	P 04	B	024
	ADVANCED MEDICINAL CHEMISTRY (PRACTICAL)	33	36	69	P 04	A	032
	DRUG DESIGN	25	31	56	P 04	B+	028
	SEMINAR	32	-	32	P 02	A	016
	RESEARCH WORK	36	-	36	P 06	A+	054
	STERILE PRODUCTS FORMULATION & TECHNOLOGY	30	25	55	P 03	B+	021
3	SEMINAR ON RESEARCH ENVISAGED FOR DISSERTATION	34	-	34	P 04	A	032
	SEMINAR ON RECENT TRENDS IN PHARMACEUTICAL CHEMISTRY	32	-	32	P 04	A	032
	RESEARCH WORK	95	-	95	P 18	A	144
4	SEMINAR ON DISSERTATION	40	-	40	* 04	O	040
	RESEARCH WORK, DISSERTATION & DEFENSE - (VIVA/VOCE)	110	69	179	* 18	A+	162
CGPA : (1) 7.880(2) 7.370(3) 8.000(4) 9.180		TOTAL 100		806			
TOT. MARKS : 1142/1300 (63.44%)		CGPA : 8.060		FINAL GRADE : A			

BCPA : (1) 7.880(2) 7.370(3) 8.000(4) 9.180 TOTAL 100 806
TOT. MARKS : 1142/1300 (63.44%) CGPA : 8.060 FINAL GRADE : A

Principal
Principal
Pravara Rural College of Pharmacy
Pravaranagar, A.P. Loni-413738

AB
Director,
Medium of instruction: English
Board of Examinations & Evaluation Date of Issue: 9 OCT 2019 DATE: 15 JUL 2019



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

MADANE NILESH NAMDEVRAO

20172016 Maharashtra Acknowledgement for Seat Acceptance of First Year Of Two Year Full Time Post-Graduate Course in Pharmacy (M. Pharm.) 2016-2017

State Common Entrance Test Cell, Maharashtra State, Mumbai
305, Government Polytechnic Building, 49, Kherwadi, Bandra (E), Mumbai 400051 (M.S.)
Receipt-cum-Acknowledgement of Seat Acceptance of CAP Round - I for Admission to First Year Of Two Year Full Time Post-Graduate Course in Pharmacy (M. Pharm.) for the year 2016 - 2017

Application ID : HPW16100567
Seat Acceptance Status Form Version: 1

Personal Details

Full Name	MADANE NILESH NAMDEVRAO
Nationality	Indian
Gender	Male
Date of Birth	28-01-1995
Annual Family Income (₹)	15,001 - 50,000
Category-Caste	NT 2 (NT-C) - Bhanger
Applied For EBC	No
Religious Minority/Linguistic Minority	N/A
PWD Type	Not Applicable
Type of Candidature	Maharashtra State Candidate - Type A

Qualification Details

Examination	Obtained	Percentage
B.Pharmacy Aggregate	542/700	77.14

Merit Details

State Level General Merit No.	150
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Provisional Allotment Details for CAP Round - I

Institute Allotted	4008-Department of Pharmaceutical Sciences, R. T. M. Nagpur University, Nagpur
Course Allotted	Pharmaceutics
Choice Code Allotted	400881713
Seat Type Allotted	GNIC
Prof No Allotted	3

Seat Acceptance Details for CAP Round - I

Seat Acceptance Status	Freeze
Seat Acceptance Confirmation Details	Confirmed

Demand Draft Details

Fee Type	Seat Acceptance Fee
DD Number	087543
DD Amount	5000 (₹)
Bank Name	Union Bank of India
Branch Name	beed
DD Date	26-07-2016
Remark	

List of Submitted Documents Required at the time of verification at ARC.

Sr. No.	Document
1	Statement of marks obtained at 10th/SSC or its Equivalent Examination
2	Statement of marks obtained at 12th/HSC or its Equivalent Examination
3	School Leaving Certificate after passing Qualifying Examination
4	Certificate of the Indian Nationality of the candidate
5	Caste Certificate stating that the caste is recognised under backward class category in Maharashtra
6	Caste / Tribe Validity Certificate issued by Caste / Tribe Certificate Scrutiny Committee
7	Non-Creamy Layer Certificate valid upto 31st March 2017
8	The School Leaving Certificate indicating the Place Of Birth In Maharashtra
9	Receipt of Online Payment
10	Valid And Qualified GPAT Score card
11	Statement of marks obtained at B. Pharmacy

Declaration : I have read all the rules of admission and on understanding these rules I have filled this Seat Acceptance form for Admission to First Year Of Two Year Full Time Post-Graduate Course in Pharmacy (M. Pharm.) 2016 - 2017. 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: 31-07-2016

Signature of the Candidate
(MADANE NILESH NAMDEVRAO)

Principal
Pravara Rural College of Pharmacy
Pravara Nagar, A.P. Loni-431336

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PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

MADRI RENU RANGASWAM

State Common Entrance Test Cell, Maharashtra State, Mumbai
305, Government Polytechnic Building, 49, Kherwadi, Bandra (E), Mumbai 400051 (M.S.)
Receipt-cum-Acknowledgment of Institute Reporting of for Admission to First Year Of
Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2016 - 2017

En ID: HPH16101806

Details

Full Name	MADRI RENU RANGASWAM	Gender	Female
Nationality	Indian	Annual Family Income (₹)	50,001 - 1,00,000
Date of Birth	22-11-1993	Applied For EBC	No
Category-Caste	SC - M-25		
Religious	N/A		
Linguistic Minority	N/A		
PWD Type	Not Applicable		
Type of Candidature	Maharashtra State Candidate - Type A		

Details

State Level Merit Number	496
Alternate Choice Code	323712510
Admitted Seat Type	MS
Preference No.	1

Details

Institute	Vivekanand Education Society's College of Pharmacy, Chembur, Mumbai	Course	323712510-Quota A
Tuition Fees (₹)	14	Admission Date	12-08-2016
Development Fees (₹)	100	Admission Type	CAP Round
Other Fees (₹)	5000		
Total Fees (₹)	5614		

Remark

by Candidate: I hereby agree to abide by rules, acts and laws enforced by Government. I hereby understand the rights of College/Institute. I will not engage in a manner which may result in compromising the authorities to law. I fully understand that the Principal/Institute of the Institute/College will have rights to expel institute from the list of the rules prescribed by the Institute/University/Government and the undertaking given above.

2016

Signature of the Candidate

INSTITUTE USE ONLY

by the College/Institute: We hereby declare that, we are admitting this Candidate to our College for the Year Full Time Post-Graduate Course in Pharmacy (M. Pharm.) for the year 2016 - 2017 on verification. Candidate has paid the fees mentioned in this receipt. We also declare that the admission of Candidate is the Candidate.

Vivekanand Education Society's College of Pharmacy
Chembur, Mumbai

11-08-2016 05:50:14 PM
11-08-2016 05:50:14 PM
11-08-2016 05:50:14 PM

Signature of Institute

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Prinip
Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413731



PRAVARA RURAL EDUCATION SOCIETY'S

PRAVARA RURAL COLLEGE
OF PHARMACY

LONI

MAHAJAN MILIND UMAKANT

State Common Entrance Test Cell, Maharashtra State, Mumbai

State Common Entrance Test Cell, Maharashtra State, Mumbai
305, Government Polytechnic Building, 49, Kherwadi, Bandra (E), Mumbai 400051. (M.S.)
Provisional Allotment for Against CAP Vacancy for Admission to First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2016 - 2017

Application ID : MPH16101845 | GPAT Score: 47

Personal Details				
Full Name	MAHAJAN MILIND UMAKANT		Date of Birth	25-01-1995
Gender	Male			
Category-Caste	OPEN -Open			
PWD Type	Not Applicable			
Religious Minority	N.A.			
Linguistic Minority	N.A.			
Type of Candidate	Maharashtra State Candidate - Type A			

Qualification Details		Percentage
Examination	Obtained	65
B.Pharmacy Aggregate :	780/1200	

Merit Details

State Level General Merit No. 1997

Status of Provisional Allotment Details for CAP Round - IV

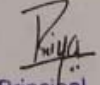
Choice Code Allotted	518582210		
Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar		
Course	Pharmaceutical Chemistry		
Seat Type	GSC	Preference No. Allotted	1

IMPORTANT INSTRUCTIONS :

- The Candidate is required to provide Application ID and Password at the time of Seat acceptance at ARC.
- The Candidate is required to submit all the original documents mention on Receipt-Cum Acknowledgement of Application Form.
- ARC should verify the documents which are listed in Candidate's Receipt-Cum-Acknowledgement

Printed On: 15-09-2016 04:06:30 PM Printed By: MPH16101845

URL: <http://mipharm16.dtemaharashtra.org/mpharm16/index.php/allotment/displayallotment?id=MTAxODQ1&rnd=NA==&log=1>


Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736

<http://mipharm16.dtemaharashtra.org/mpharm16/index.php/allotment/displayallotment?id=MTAxODQ1&rnd=NA==&log=1>



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

MOTE SHITAL

8122034

State Common Entrance Test Cell, Maharashtra State, Mumbai

 **GOVERNMENT OF MAHARASHTRA**
STATE COMMON ENTRANCE TEST CELL
305, Government Polytechnic Building, Bhamburda, Mumbai - 400051 (M.S.).
Seat Acceptance Form For CAP Round - IV for Admission to First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2016-2017

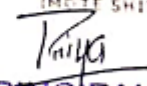
Application ID :MPH16101322		Seat Acceptance Status Form Version : 1	
Personal Details			
Full Name	MOTE SHITAL PRAHAD		
Gender	Female	Date of Birth	11-01-1994
Category-Caste	OPEN		
PWD Type	Not Applicable		
Religious Minority	N.A		
Linguistic Minority	N.A		
Type of Candidature	Maharashtra State Candidate - Type A		
Qualification Details			
Examination	Obtained	Percentage	
B.Pharmacy Aggregate :	760/1200	63.33	
Merit Details			
State Level General Merit No.	2500		
Status of Provisional Allotment Details for CAP Round - IV			
Choice Code Alloted	519512610		
Institute	Sanjivani Rural Education Society's Sanjivani College of Pharmaceutical & Research, Kopergaon		
Course	Quality Assurance Techniques		
Seat Type	GOPEM	Preference No. Alloted	1
Seat Acceptance Details			
Candidate Seat Acceptance Status	Freeze (Version: 1)		
ARC Seat Acceptance Status(Considered For Allotment)	Not Confirmed At ARC		
Seat Acceptance Confirmation Details	Not Confirmed		

Declaration
I have read all the rules of admission and on understanding these Rules, I have filled this Seat Acceptance Form for CAP Round - IV for the admission to First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the Academic Year 2016-2017.
The information given by me in this form is true to the best of my knowledge & belief. I am fully aware that I will be responsible for all further consequences arises due to my mistake.
I also herewith undertake that, at later stage, if it is found that I have submitted false certificate(s)/document(s), I am aware that my admission stands cancelled and fees paid by me will be forfeited. Further I will be subjected to legal and/or penal action as per the provisions of the law.

Confirmed on: 12-08-2016 03:20:56 PM
Confirmed By: MPH16101322
Printed on: 12-08-2016 03:20:56 PM
Date: 12-09-2016

Last modified on: 12-08-2016 03:20:56 PM
Last modified by: MPH16101322
Printed By: MPH16101322

Signature of the Candidate
(MOTE SHITAL PRAHAD)


PRINCIPAL
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736





PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

PAWADE PRATIBHA SAHEBRAO

State Common Entrance Test Cell, Maharashtra State, Mumbai 400051 (M.S.)
305, Government Polytechnic Building, 49, Runwad, Bandra(E), Mumbai 400051 (M.S.)
Receipt-cum-Acknowledgement of Institute Reporting of for Admission to First Year Of Two Year Full Time Post-Graduate Course in Pharmacy (M. Pharm.) for the year 2016 - 2017

Application ID: MPH16101336

Personal Details

Full Name	PAWADE PRATIBHA SAHEBRAO	Gender	Female
Nationality	Indian	Annual Family Income (₹)	15,001 - 50,000
Date of Birth	25-12-1992	Applied For ERC	No
Category-Caste	OBC - Kumbh		
Religious Minority/Linguistic Minority	N.A		
PWD Type	Not Applicable		
Type of Candidature	Maharashtra State Candidate - Type A		

Allotment Details

State Level Merit Number	2484
Allotted Choice Code	518512610
Allotted Seat Type	OST
Preference No.	1

Reporting Details

Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar	Course	518512610-Quality Assurance Techniques
Tuition Fees (₹)	2185/-	Admission Date	12-08-2016
Development Fees (₹)	9505/-	Admission Type	CAP Round
Other Fees (₹)	0/-		
Total Fees (₹)	11690/-		

Remark: confirmed

Declaration by Candidate: I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the institute/college will have rights to expel/rusticate me from the institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

Date: 13-08-2016

Place: _____

INSTITUTE USE ONLY

Declaration by the College/Institute: We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course in Pharmacy (M. Pharm.) for the year 2016 - 2017 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Signature of Institute Officer (5185)

Signature of The Candidate (PAWADE PRATIBHA SAHEBRAO)

Reported On: 13-08-2016 10:11:36 AM
Printed On: 13-08-2016 10:11:38 AM
Last Modified On: 13-08-2016 10:11:36 AM
URL: http://mpharm16.0temaharashtra.org/mpharm16/institute_report.php/institute_reporting/admitreceipt?id=NTAx&rd=NA

Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736



PRAVARA RURAL EDUCATION SOCIETY'S

PRAVARA RURAL COLLEGE
OF PHARMACY

LONI

SHARMALE MANISHA NANASAHEB

 State Common Entrance Test Cell, Maharashtra State, Mumbai
305, Government Polytechnic Building, 49, Kherwadi, Bandra (E), Mumbai 400051. (M.S.)
Receipt-cum-Acknowledgement of Institute Reporting of for Admission to First Year Of Two Year Full
Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2016 - 2017

Application ID: MPH16101555

Personal Details

Full Name	SHARMALE MANISHA NANASAHEB		
Nationality	Indian	Gender	Female
Date of Birth	20-01-1995	Annual Family Income (₹)	15,001 - 50,000
Category-Caste	NT 2 (NT-C) - Dhongar	Applied For EBC	No
Religious Minority/Linguistic Minority	N.A.		
PWD Type	Not Applicable		
Type of Candidature	Maharashtra State Candidate - Type A		

Admission Details

State Level Merit Number	1140
Allotted Choice Code	518582210
Allotted Seat Type	GHIC
Preference No.	1

Reporting Details

Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar		
Tuition Fees (₹)	0/-	Course	518582210-Pharmaceutical Chemistry
Development Fees (₹)	1140/-	Admission Date	12-08-2016
Other Fees (₹)	0/-	Admission Type	CAP Round
Total Fees (₹)	1140/-		
Remark	Confirmed		

Declaration by Candidate : I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the institute/college will have rights to expel, rusticate me from the institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

Date: 13-08-2016

Place :

INSTITUTE USE ONLY

Declaration by the College/Institute : We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2016 - 2017 on verification of Candidate's Identity. The candidate has paid the fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

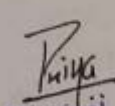
Seal of Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar

Reported On: 13-08-2016 09:54:33 AM
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Last Modified On: 13-08-2016 09:54:33 AM
URL: http://mpharm16.dtemaharashtra.org/mpharm16/institute_report.php/institute_reporting/admitreceipt?id=NDg4&md=MQ==

Signature of The Candidate
(SHARMALE MANISHA NANASAHEB)

Signature of Institute Officer (5185)

Reported By: 5185
Printed By: 5185
Last Modified By: 5185


Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

SHELKE ADITYA SHIRISH

State Common Entrance Test Cell, Maharashtra State, Mumbai

State Common Entrance Test Cell, Maharashtra State, Mumbai
305, Government Polytechnic Building, 49, Kherwadi, Bandra (E), Mumbai 400051. (M.S.)
Provisional Allotment for CAP Round - IV for Admission to First Year Of Two Year Full Time Post-Graduate
Course In Pharmacy (M. Pharm.) for the year 2016 - 2017

Application ID : MPH16100130 | GPAT Score: 41

Personal Details		
Full Name	SHELKE ADITYA SHIRISH	
Gender	Male	Date of Birth
Category-Caste	OPEN -Open	07-06-1994
PWD Type	Not Applicable	
Religious Minority	N.A.	
Linguistic Minority	N.A.	
Type of Candidature	Maharashtra State Candidate - Type A	

Qualification Details		Percentage
Examination	Obtained	67
B.Pharmacy Aggregate :	604/1200	

Merit Details
State Level General Merit No. 12162

Status of Provisional Allotment Details for CAP Round - IV

Choice Code Allotted	S18512611		
Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar		
Course	Quality Assurance Techniques (Sponsored)		
Seat Type	GOPEN	Preference No. Allotted	1

IMPORTANT INSTRUCTIONS :

- The Candidate is required to provide Application ID and Password at the time of Seat acceptance at ARC.
- The Candidate is required to submit all the original documents mention on Receipt-Cum Acknowledgement of Application Form.
- ARC should verify the documents which are listed in Candidate's Receipt-Cum-Acknowledgement

Printed On: 12-08-2016 09:28:17 AM Printed By: MPH16100130
URL: <http://mpharm16.dtemaharashtra.org/mpharm16/index.php/allotment/displayallotment?id=MTAwMTMw&rnd=NA==&log=1>

Principa
Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

SINARE SUJAL BALASAHEB

State Common Entrance Test Cell, Maharashtra State, Mumbai
305, Government Polytechnic Building, 49, Kherwadi, Bandra (E), Mumbai 400051. (M.S.)
Receipt-cum-Acknowledgement of Institute Reporting of for Admission to First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2016 - 2017

Application ID : HPH16101082

Personal Details			
Full Name	SINARE SUJAL BALASAHEB		
Nationality	Indian		
Date of Birth	10-12-1993	Gender	Female
Category-Caste	OBC - Kunbi	Annual Family Income (₹)	15,001 - 50,000
Religious Minority/Linguistic Minority	N.A	Applied For EBC	No
PWD Type	Not Applicable		
Type of Candidature	Maharashtra State Candidate - Type A		

Attachment Details

State Level Merit Number	2594
Allotted Choice Code	518581910
Allotted Seat Type	GOFTN
Preference No.	1

Reporting Details

Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Tuition Fees (₹)	6615/-
Development Fees (₹)	9505/-
Other Fees (₹)	0/-
Total Fees (₹)	16140/-
Remark	Confirmed

Declaration by Candidate : I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the institute/college will have rights to expel, rusticate me from the institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

Date: 13-08-2016

Place :

Signature of The Candidate
(SINARE SUJAL BALASAHEB)



INSTITUTE USE ONLY

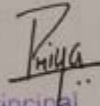
Declaration by the College/Institute : We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2016 - 2017 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar

Reported On: 13-08-2016 09:41:03 AM
Printed On: 13-08-2016 09:41:05 AM
Last Modified On: 13-08-2016 09:41:03 AM
URL: http://mpharm16.dtemaharashtra.org/mpharm16/institute_report.php/institute_reporting/admitreceipt?id=NDgx&md=MQ==

Signature of Institute Officer (5185)

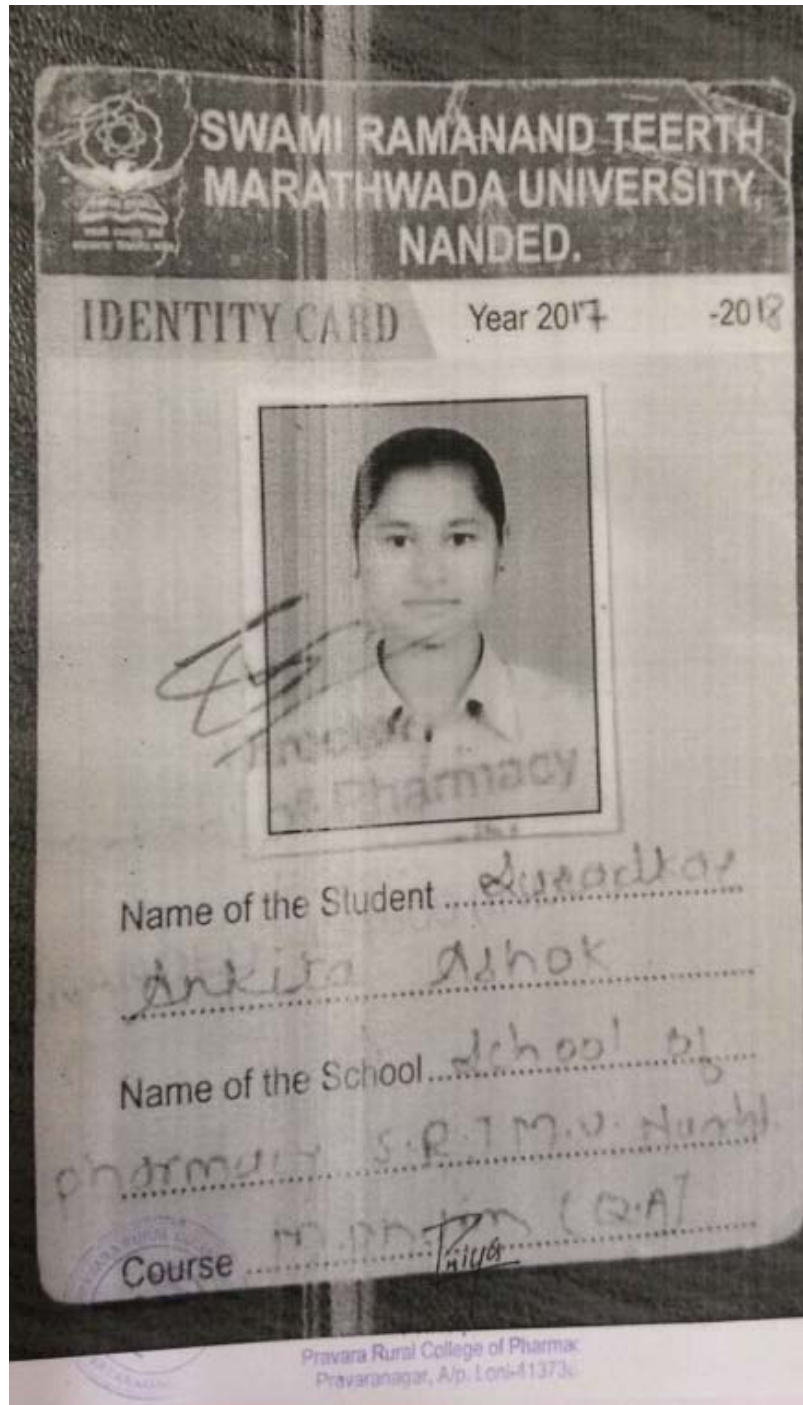
Reported By: 5185
Printed By: 5185
Last Modified By: 5185


Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
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LONI

SURADKAR ANKITA ASHOK





PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

TAMBE ARTI DINKAR


सत्यमेव जयते

State Common Entrance Test Cell, Maharashtra State, Mumbai
305, Government Polytechnic Building, 49, Kherwadi, Bandra (E), Mumbai 400051, (M.S.)
Receipt-cum-Acknowledgement of Institute Reporting of for Admission to First Year Of Two Year Full
Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2016 - 2017

Application ID: MPH16100947

Personal Details	
Full Name	TAMBE ARTI DINKAR
Nationality	Indian
Date of Birth	04-04-1995
Category-Caste	OBC-Kunabi
Religious Minority/Linguistic Minority	N.A.
PWD Type	Not Applicable
Type of Candidature	Maharashtra State-Candidate - Type A
Gender	Female
Annual Family Income (₹)	50,001 - 1,00,000
Applied For EBC	No



Allotment Details	
State Level Merit Number	771
Allotted Choice Code	S18512610
Allotted Seat Type	OPEN
Preference No.	1

Reporting Details	
Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Tuition Fees (₹)	0/-
Development Fees (₹)	140/-
Other Fees (₹)	0/-
Total Fees (₹)	140/-
Remark	confirmed
Course	S18512610-Quality Assurance Techniques
Admission Date	12-08-2016
Admission Type	CAP Round

Declaration by Candidate : I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the Institute/college will have rights to expel, suspend me from the Institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

Date: 13-08-2016

Signature of The Candidate:
(TAMBE ARTI DINKAR)

Place : 

INSTITUTE USE ONLY

Declaration by the College/Institute : We hereby declare that, we are admitting this Candidate to our College / Institute for First Year / Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2016 - 2017 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Reported On: 13-08-2016 10:17:38 AM
Printed On: 13-08-2016 10:17:40 AM
Last Modified On: 13-08-2016 10:17:38 AM
JRL: http://mpharm16.dtemaharashtra.org/mpharm16/institute_report.php/institute_reporting/admitreceipt?id=NTA25&md=MQ==

Signature of Institute Officer

Reported By: 51
Printed By: 51
Last Modified By: 51


Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736



PRAVARA RURAL EDUCATION SOCIETY'S

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OF PHARMACY

LONI

WAGHMARE SWAPNIL SUNIL



ALL INDIA SHRI SHIVAJI MEMORIAL
SOCIETY'S COLLEGE OF PHARMACY
NEAR R.T.O. KENNEDY ROAD, PUNE - 411 001
(Recognised by AICTE, PCI & Affiliated to University of Pune)



Name : Waghmare Swapnil Sunil
Class : F.Y.
Branch : M'Pharm (QA)
Enrollment No. : 159/17
Validity Date : 08/01/2016 to 30/07/2020
Date of Birth : 12/06/1994
Blood Group : B+VE

Ashwini R. Madgulkar

Dr. Ashwini R. Madgulkar
Principal

[Signature]
Principal
Pravara Rural College of Pharmacy
Pravarinagar, A/p. Loni-413736



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ZODAGE MUKESH BABURAO

12/2016

State Common Entrance Test Cell, Maharashtra State, Mumbai

State Common Entrance Test Cell, Maharashtra State, Mumbai
305, Government Polytechnic Building, 49, Kherwadi, Bandra (E), Mumbai 400051. (M.S.)
Provisional Allotment for CAP Round - I for Admission to First Year Of Two Year Full Time Post-Graduate
Course In Pharmacy (M. Pharm.) for the year 2016 - 2017
Published On : 29-07-2016 at 06:00 PM

Application ID : MPH16101412 GPAT Score: 89

Full Name		ZODAGE MUKESH BABURAO	
Gender	Male	Date of Birth	01-08-1993
Category-Caste	SC -Mahar (37)		
PWD Type	Not Applicable		
Religious Minority	N.A.		
Linguistic Minority	N.A.		
Type of Candidature	Maharashtra State Candidate - Type A		

Examination	Qualification Details	Percentage
B.Pharmacy Aggregate :	Obtained 715/1200	59.58

State Level General Merit No. 837

Status of Provisional Allotment Details for CAP Round - I

Choice Code Allotted	S18512610		
Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar		
Course	Quality Assurance Techniques		
Seat Type	GOPEN	Preference No. Allotted	4

IMPORTANT INSTRUCTIONS :

- The Candidate is required to provide Application ID and Password at the time of Seat acceptance at ARC.
- The Candidate is required to submit all the original documents mention on Receipt-Cum Acknowledgement of Application Form.
- ARC should verify the documents which are listed in Candidate's Receipt-Cum-Acknowledgement

Printed On: 12-08-2016 09:29:23 AM Printed By: MPH16101412

URL: <http://mpharm16.dtemaharashtra.org/mpharm16/index.php/allotment/displayallotment?id=MTAxNDEx&rnd=MQ==>

Prin
Principal
Pravara Rural College of Pharmacy,
Pravaranagar, A/p. Loni-413736

<http://mpharm16.dtemaharashtra.org/mpharm16/index.php/allotment/displayallotment?id=MTAxNDEx&rnd=MQ==>

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PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

ASAVA TEJSHWINI LALCHAND

Exam Acknowledgment of Allotment Form - Pharmacy 2015 http://mptm15.dte.maharashtra.org/mptm15/Student_report.php

9155

DIRECTORATE OF TECHNICAL EDUCATION, MAHARASHTRA STATE, MUMBAI
3, Mahatma Park, Elphinstone Technical High School Campus, Mumbai - 400001
Provisional Allotment Letter of CAP Round 1 by Counselling for Admission to M - Pharmacy
2015 - 2016

Sponsorship Status : Non Sponsored	Application ID : PPH15103764	GPAT Status : Non GPAT Candidate	CET Score :50
------------------------------------	------------------------------	----------------------------------	---------------

Personal Details :

Full Name	ASAVE TEJASWINI LALCHAND		
Nationality	Indian	Gender	Female
Category-Caste	OPB (OBC)	Type of Candidature	Type A
PH Type	Not Applicable	Date of Birth	15/07/1993
Annual Family Income (₹)	< 1,00,000		

Qualification Details

Examination	Marks Obtained	Out of	Percentage
B.Pharmacy	Appearing	Appearing	Appearing

Merit Details :

State Level General Merit No. 2224	Category Merit No.
------------------------------------	--------------------

Allotment Details

Choice Code	51858/210
Course	Pharmaceutical Chemistry
Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Seat Type	III

NOTE: The candidate has paid Rs.5000/- In DO(DO Number :226937) As a partial payment
Declaration by Candidate

I hereby agree to furnish all such data and facts demanded by Government. I hereby undertake that so long as I am student of College/Institute, I will not get involved in any activity which may result in suspending the authorities to take disciplinary action against me. I fully understand that by the qualification of the institute/college will have rights to expel, revoke me from the institute, for any misbehavior of the rules prescribed by the said institute/university/government and the undertaking given above.
Reporting to the institute as per allotment - 22-06-2015 To 03-07-2015

Date: 25/6/15
Place: Aurangabad

Signature of The Candidate
(ASAVE TEJASWINI LALCHAND)

Allotted On 25-06-2015 12:11:52	Allotted By: adminnavale	Printed On: 25-06-2015 12:11:54	Printed By: adminnavale
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OFFICE USE ONLY

Seal of adminnavale	Signature of Authorised Officer (adminnavale)
Last Modified By: PPH15103764	Last Modified on: 08-05-2015 17:14:19

Joint Director (Admin.)
Technical Education (R.O.)
Aurangabad

Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736



**PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI**

BHANDARI AKSHAY SHRIRAM

(667)

 **DIRECTORATE OF TECHNICAL EDUCATION, MAHARASHTRA STATE, MUMBAI**
3, Mahapalika Marg, Elphinstone Technical Highschool Campus, Mumbai - 400001.
Provisional Allotment Letter of CAP Round 1 by Counselling for Admission to M - Pharmacy
2015 - 2016

Sponsorship Status : Non Sponsored	Application ID : MPH15103478	GPAT Status : Non GPAT Candidate	CET Score : 63
Personal Details :			
Full Name	BHANDARI AKSHAY SHRINIWAS		
Nationality	Indian	Gender	Male
Category-Caste	OPEN- Open	Type of Candidature	Type A
PH Type	Not Applicable	Date of Birth	17/06/1993
Annual Family Income (₹)	< 1,00,000		
Qualification Details			
Examination	Marks Obtained	Out of	Percentage
B.Pharmacy	Appearing	Appearing	Appearing
Merit Details :			
State Level General Merit No.	1140	Category Merit No.	-
Allotment Details			
Choice Code	518512510		
Course	Quality Assurance		
Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar		
Seat Type	NH		

NOTE: The candidate has paid Rs.5000/- In CASH As a partial payment.
Declaration by Candidate

I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the institute/college will have rights to expel, rusticate me from the institute, for any breach of the rules prescribed by the college/institute/university/Government and the undertaking given above.
Reporting to the institute as per allotment : 23-06-2015 To 03-07-2015

Date: 24-6-2015	Signature of the Candidate (BHANDARI AKSHAY SHRINIWAS)	
Place: Aurangabad	Printed On: 24-06-2015 11:17:43	Printed By: adminnawale
Allotted On: 24-06-2015 11:17:40	Allotted By: adminnawale	
OFFICE USE ONLY		
Seal of adminnawale	Signature of Authorised Officer (adminnawale)	
Last Modified By: MPH15103478	Last Modified on: 08-05-2015 17:58:29	

Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736

Joint Director (Admin.)
Technical Education (R.O.)
Aurangabad.

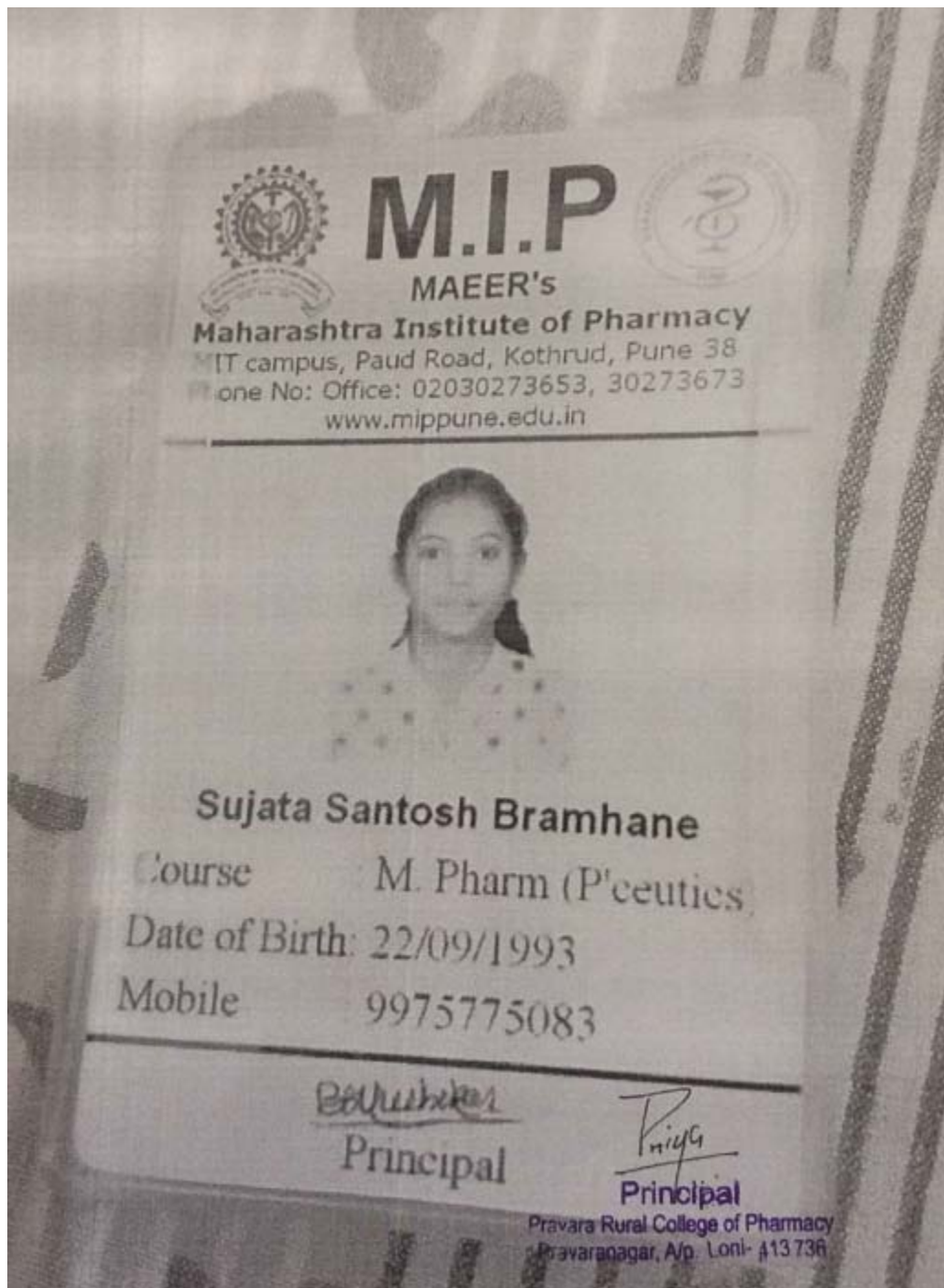


PRAVARA RURAL EDUCATION SOCIETY'S

PRAVARA RURAL COLLEGE
OF PHARMACY

LONI

BRAHMANE SUJATA SANTOSH





PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

CHAVAN SNEHA SHRIRAM

University of Mumbai
CERTIFICATE SHOWING THE RESULT OF THE CANDIDATE CCF: 249-0007

NAME: /CHAVAN SNEHA SHRIRAM KAMAL
EXAMINATION: MASTER OF PHARMACY DEGREE (SEM. III & IV) (CBSGS)
HELD IN: MAY 2018
SEAT NUMBER: 1

COURSE TITLE	MAXIMUM MARKS	MINIMUM MARKS	OBTAINED MARKS	GRADE CREDIT POINT			
				CREDIT	GRADE	GRADE POINT	CXG
DISSERTATION & VIVA-VOCE				--	--	--	--
EXTERNAL	50	20	35	--	--	--	--
INTERNAL	50	20	36	48		B	384
	100	40	071		SGPA	B	

SEM. I (4 C) AND EXPERIMENTAL TECH. IN PHARMA. SCIENCE (4 C) NOT INCLUDED IN GPA CALCULATION

SEM. I CREDIT - 20 CXG - 128	SEM. II CREDIT - 20 CXG - 144	SEM. III & IV CREDIT - 48 CXG - 384
CGPA: 7.45		

SUCCESSFUL

REMARK:

RESULT DECLARED ON: 16 MAY 2018

[Signature]
DIRECTOR
BOARD OF EXAMINATIONS & EVALUATION



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

CHOKHAR SANDESH MADHUKAR

NO: 17- 0083033

SAVITRIBAI PHULE PUNE UNIVERSITY
(Formerly University of Pune)
GANESHBHIMA PUNE 411 007.

STATEMENT OF MARKS FOR: MASTER OF PHARMACY (REV.2013) PHARMACEUTICS

SEAT NO. 10065 CENTRE 2 PERM REG. NO.: 0411500025
NAME: CHOKHAR SANDESH MADHUKAR MOTHER: PARULATA
COLLEGE: PUNE N.D.M.V.P., LONI

YEAR: JUNE-2017

SEM.	NAME OF THE COURSE	CP	MARKS	GP	CRS	GP	GP
		INT	UCH	TOT	RTS	AGE	GP
1	ADVANCED ANALYTICAL TECHNIQUES	29	31	60	P-04	A	0.30
	ADVANCED ANALYTICAL TECHNIQUES (PRACTICAL)	24	24	48	P-04	A	0.30
	RESEARCH METHODOLOGY	33	29	62	P-04	A	0.30
	BIOPHARMACEUTICS AND PHARMACOKINETICS	23	27	50	P-03	A	0.30
	ADVANCED PHARMACEUTICS	30	24	54	P-04	A	0.30
	ADVANCED PHARMACEUTICS (PRACTICAL)	31	29	60	P-04	A	0.30
	SEMINAR	41	-	41	P-02	A	0.30
2	DRUG REGULATORY AFFAIRS	34	23	57	P-04	A	0.30
	FORMULATIONS AND DEVELOPMENT	33	30	63	P-04	A	0.30
	FORMULATIONS AND DEVELOPMENT (PRACTICAL)	27	21	48	P-04	A	0.30
	NOVEL DRUG DELIVERY SYSTEMS	26	25	51	P-04	A	0.30
	SEMINAR	40	-	40	P-02	A	0.30
	RESEARCH WORK	38	-	38	P-04	A	0.30
	STERILE PRODUCTS FORMULATION & TECHNOLOGY	32	26	58	P-03	A	0.30
3	SEMINAR ON RESEARCH ENVIRONMENT FOR DISSERTATION	37	-	37	P-04	A	0.30
	SEMINAR ON RECENT TRENDS IN PHARMACEUTICAL SCIENCES	38	-	38	P-04	A	0.30
	RESEARCH WORK	107	-	107	P-18	C	1.00
4	SEMINAR ON DISSERTATION	27	-	27	P-04	A	0.30
	RESEARCH WORK-DISSENTATION & DEFENSE - (VIVA/VOCC)	101	62	163	P-18	A	1.44
SCPA I (1) 7.690(2) 0.110(3) 9.390(4) 7.640							
TOT.MARKS: 1183/1300 : 91.77% : SCPA I: 8.310 FINAL GRADE: A							

Director,
Board of Examinations & Evaluation

Medium of instruction: English

STATEMENT NO: _____

DATE: 12 JUL 2017



Prin
Principal
Pravara Rural College of Pharmacy
Pravaranagar, Ato. 1



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

DEORAYE SONAL SUBHASH

2043

DIRECTORATE OF TECHNICAL EDUCATION, MAHARASHTRA STATE, MUMBAI
3, Mahapeikar Marg, Elphinstone Technical High School Campus, Mumbai - 400013
Provisional Allotment Letter of CAP Round 1 by Counseling for Admission to B.Pharmacy 2015 - 2016

Sponsorship Status : Non Sponsored Application ID : MPH15101894 GPAT Status : Non GPAT Candidate CET Score : 29

Personal Details :

Full Name	SONAL SUBHASH DEORAYE		
Nationality	Indian	Gender	Female
Category-Caste	SC-Chambhar	Type of Candidature	Type A
PH Type	Not Applicable	Date of Birth	12/08/1993
Annual Family Income (₹)	< 1,00,000		

Qualification Details :

Examination	Marks Obtained	Out of	Percentage
B.Pharmacy	Appearing	Appearing	Appearing

Merit Details :

State Level General Merit No.	3710	Category Merit No.	
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Allotment Details :

Choice Code	518512510
Course	Quality Assurance
Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Seat Type	SCST

Declaration by Candidate

I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of a College/Institute, I will not achieve in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Dean of the institution/college will have rights to expel, suspend me from the institute. No other abridgement of the rules provided by the college/university/Government, and the undertaking given above.

Reporting to the institute as per allotment : 23-06-2015 To 03-07-2015

Date : 27/06/2015
Place : Aurangabad

Signature of The Candidate (SONAL SUBHASH DEORAYE)

Printed On: 27-06-2015 15:42:46
Allotted On: 27-06-2015 15:42:44
Allotted By: adminnawale
Printed By: adminnawale

OFFICE USE ONLY

Seal of adminnawale
Last Modified By: MPH15101894

Signature of Authorised Officer (adminnawale)
Last Modified on: 06-07-2015 16:29:11

Joint Director (Admin.)
Technical Education (R.O.)
Aurangabad.

Principal
Pravara Rural College of Pharmacy
Pravaranagar, A.P. Loni-43736

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**PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI**

DIGHE RAJASHRI SUBHASH



DIRECTORATE OF TECHNICAL EDUCATION, MAHARASHTRA STATE, MUMBAI.
3, Mahapalika Marg, Elphinstone Technical Highschool Campus, Mumbai - 400001.
Provisional Allotment Letter of CAP Round 1 by Counselling for Admission to M - Pharmacy
2015 - 2016

Sponsorship Status : Non sponsored	Application ID : MPH15103187	GPAT Status : Non GPAT Candidate	CET Score :48	
Personal Details :				
Full Name	DIGHE RAJASHRI SUBHASH			
Nationality	Indian	Gender		Female
Category-Caste	OPEN- Open	Type of Candidature		Type A
Marital Status	Not Applicable	Date of Birth		02/02/1994
Annual Family Income (₹)	< 1,00,000			

Qualification Details		Percentage
Examination	Marks Obtained	Out of
M.Pharmacy	Appearing	Appearing

Merit Details :	
State Level General Merit No.	2568
Category Merit No.	-
Allotment Details	
Choice Code	518582210
Course	Pharmaceutical Chemistry
Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Seat Type	NRI

NOTE: The candidate has paid Rs.5000/- In CASH As a partial payment.
Declaration by Candidate

I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the institute/college will have rights to expel, rusticate me from the institute, for any breach of the rules prescribed by the college/institute/university/Government and the undertaking given above.
Reporting to the institute as per allotment : 23-06-2015 To 03-07-2015

Date: 25/06/15	Signature of The Candidate (DIGHE RAJASHRI SUBHASH)
Place: Aurangabad	Printed By: adminnawale
Allotted On: 25-06-2015 15:15:14	Printed On: 25-06-2015 15:15:16

OFFICE USE ONLY	
Seal of adminnawale	Signature of Authorised Officer (adminnawale)
Last Modified By: MPH15103187	Last Modified on: 07-05-2015 12:10:01

Joint Director (Admin.)
Technical Education (R.O.)
Aurangabad.

Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

GARJE NILESH UDDHAV

ipf-cum-Acknowledgement of Allotment Form - Pharmacy 2015... http://uppharm15.demoharashtra.org/uppharm15/institute_report.php

DIRECTORATE OF TECHNICAL EDUCATION, MAHARASHTRA STATE, MUMBAI
3, Mahapalika Marg, Elphinstone Technical Highschool Campus, Mumbai - 400001.
Provisional Allotment Letter of CAP Round 1 by Counseling for Admission to M - Pharmacy
2015 - 2016

Sponsorship Status : Non Sponsored **Application ID : MPH15103227** **GPAT Status : Non GPAT Candidate** **CET Score : 59**

Personal Details :

Full Name	GARJE NILESH UDDHAV			
Nationality	Indian	Gender	Male	
Category-Caste	OPEN- Open	Type of Candidature	Type A	
PH Type	Not Applicable	Date of Birth	21/11/1993	
Annual Family Income (₹)	< 1,00,000			

Qualification Details

Examination	Marks Obtained	Out of	Percentage
B.Pharmacy	Appearing	Appearing	Appearing

Merit Details :

State Level General Merit No.	1411	Category Merit No.	-
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Allotment Details

Choice Code	518512510
Course	Quality Assurance
Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Seat Type	NH

NOTE: The candidate has paid Rs.5000/- In CASH As a partial payment.
Declaration by Candidate

I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the Institute/college will have rights to expel, rusticate me from the Institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.
Reporting to the Institute as per allotment : 23-06-2015 To 03-07-2015

Date: 24/6/15	Signature of The Candidate (GARJE NILESH UDDHAV)		
Place: Aurangabad			
Allotted On: 24-06-2015 13:23:33	Allotted By: adminnawale	Printed On: 24-06-2015 13:23:37	Printed By: adminnawale

OFFICE USE ONLY

Seal of adminnawale	Signature of Authorised Officer (adminnawale)
Last Modified By: ARCS161	Last Modified on: 11-05-2015 15:09:16

Joint Director (Admin.)
Technical Education (R.O.)
Aurangabad.

Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736

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**PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI**

GHATUL BALASAHEB BABASAHEB

Provisional Acknowledgement of Allotment Form - Pharmacy 2015... <http://mform.sme.maharashtra.gov.in>

DIRECTORATE OF TECHNICAL EDUCATION, MAHARASHTRA STATE, MUMBAI.
3, Mahapalika Marg, Elphinstone Technical Highschool Campus, Mumbai - 400001.
Provisional Allotment Letter of CAP Round 1 by Counselling for Admission to M - Pharmacy
2015 - 2016

Sponsorship Status : Non Sponsored **Application ID : MPH15103258** **GPAT Status : Non GPAT Candidate** **CET Score : 55**

Personal Details :

Full Name	GHATUL BALASAHEB BABASAHEB		
Nationality	Indian	Gender	Male
Category-Caste	OPEN- Open	Type of Candidature	Type A
PH Type	Not Applicable	Date of Birth	04/06/1992
Annual Family Income (₹)	< 1,00,000		

Qualification Details

Examination	Marks Obtained	Out of	Percentage
B.Pharmacy	Appearing	Appearing	Appearing

Merit Details :

State Level General Merit No.	1725	Category Merit No.	-
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Allotment Details

Choice Code	518582210
Course	Pharmaceutical Chemistry
Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Seat Type	NH

NOTE: The candidate has paid Rs.5000/- In CASH As a partial payment.
Declaration by Candidate

I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the institute/college will have rights to expel, rusticate me from the institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.
Reporting to the institute as per allotment : 23-06-2015 To 01-07-2015

Date: 24-6-2015
Place: Aurangabad

Signature of The Candidate (GHATUL BALASAHEB BABASAHEB)

Printed On: 24-06-2015 16:42:41
Printed By: adminnawale

OFFICE USE ONLY

Seal of adminnawale
Last Modified By: MPH15103258

Signature of Authorised Officer (adminnawale)
Last Modified on: 06-05-2015 18:35:53

Joint Director (Admin.)
Technical Education (R.O.)
Aurangabad.

Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736

06/24/2015 4:42 PM
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PRAVARA RURAL EDUCATION SOCIETY'S

PRAVARA RURAL COLLEGE
OF PHARMACY

LONI

OLAP SUPRIYA TATYASAHEB

DIRECTORATE OF TECHNICAL EDUCATION, MAHARASHTRA STATE, AURANGABAD
3, Mahapekha Marg, Elphinstone Technical High School Campus, Mumbai - 400011
Provisional Allotment Letter of CAP Round 1 by Counselling for Admission to B - Pharmacy
2015 - 2016

1299

Sponsorship Status : Non Sponsored	Application ID : MPH15102645	GPAT Status : Non GPAT Candidate	CET Score : A4
Personal Details :			
Full Name	GHOLAP SUPRIYA TATYASAHEB		
Nationality	Indian	Gender	Female
Category-Caste	OPEN- Open	Type of Candidature	Type A
PII Type	Not Applicable	Date of Birth	04/04/1994
Annual Family Income (₹)	3,50,001 - 4,00,000		

Qualification Details			
Examination	Marks Obtained	Out of	Percentage
Pharmacy	Appearing	Appearing	Appearing

Merit Details :	
State Level General Merit No.	3184
Category Merit No.	-

Allotment Details	
Choice Code	518582210
Course	Pharmaceutical Chemistry
Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Seat Type	NA

NOTE: The candidate has paid Rs.5000/- In DD(DD Number :952140) As a partial payment.
Declaration by Candidate

I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the institute/college will have rights to expel, rusticate me from the institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.
Reporting to the institute as per allotment : 23-06-2015 To 03-07-2015

Date: 26/06/15
Place: Aurangabad

Allotted On: 26-06-2015 11:51:03
Allotted By: adminnawale

Printed On: 26-06-2015 11:51:06
Printed By: adminnawale

Signature of The Candidate
(GHOLAP SUPRIYA TATYASAHEB)

OFFICE USE ONLY

Seal of adminnawale
Last Modified By: MPH15102645

Signature of Authorised Officer (adminnawale)
Last Modified on: 07-05-2015 19:53:47

Joint Director (Admin.)
Technical Education (R.O.)
Aurangabad.

Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736

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PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

GHOLAP VISHAL DILIP

SAVITRIBAI PHULE PUNE UNIVERSITY
Bhamburda Road, Pune 411 007.
STATEMENT OF MARKS FOR POSTER NO. PHARMED 1804-2013 PHARMACEUTICS

SEAT NO. 11003, CENTRE 1, PERM REG. NO. 2411000004
NAME VISHAL DILIP GHOLAP, BOTHER : ANURAGH
COLLEGE GHOLAP N. D. M. V. P. LONI

YEAR & SEM. 2017	NAME OF THE COURSE	ENT	GR	TOT	STTS	AVG	CP
	ADVANCED ANALYTICAL TECHNIQUES	32	27	59	P	84	84
	ADVANCED ANALYTICAL TECHNIQUES (PRACTICAL)	32	33	65	P	84	84
	RESEARCH METHODOLOGY	35	33	68	P	84	84
	BIOPHARMACEUTICS AND PHARMACOKINETICS	36	26	62	P	84	84
	ADVANCED PHARMACEUTICS	35	32	67	P	84	84
	ADVANCED PHARMACEUTICS (PRACTICAL)	35	32	67	P	84	84
	SEMINAR	29	-	29	P	84	84
	DRUG REGULATORY AFFAIRS	33	32	65	P	84	84
	FORMULATIONS AND DEVELOPMENT	36	34	70	P	84	84
	FORMULATIONS AND DEVELOPMENT (PRACTICAL)	36	33	69	P	84	84
	NOVEL DRUG DELIVERY SYSTEMS	40	32	72	P	84	84
	SEMINAR	34	-	34	P	84	84
	RESEARCH WORK	38	-	38	P	84	84
	STERILE PRODUCTS FORMULATION & TECHNOLOGY	34	33	67	P	84	84
	SEMINAR ON RESEARCH ORIENTED FOR DISSERTATION	28	-	28	P	84	84
	SEMINAR ON RECENT TRENDS IN PHARMACEUTICAL SCIENCES	42	-	42	P	84	84
	RESEARCH WORK	102	-	102	P	84	84
	SEMINAR ON DISSERTATION	38	-	38	P	84	84
	RESEARCH WORK, DISSERTATION & DEFENSE - TOTAL/100%	114	73	187	P	84	84

CPA : 113, T. APPROVED : 100, T. REJECTED : 100, T. TOTAL : 213
DI. MARKS : 100, T. APPROVED : 100, T. REJECTED : 100, T. TOTAL : 213
CPA : 113, T. APPROVED : 100, T. REJECTED : 100, T. TOTAL : 213
FINAL GRADE : A

Director
Board of Examinations & Evaluation

Principal
Pravara Rural College of Pharmacy



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

GHORPADE ANUJA MACCHINDRA

script-cum-Acknowledgement of Allotment Form - Pharmacy 2015... http://npform15.dtemaharashtra.org/npform15/institute_report.php

(945)

DIRECTORATE OF TECHNICAL EDUCATION, MAHARASHTRA STATE, MUMBAI
3, Mahapalika Marg, Elphinstone Technical Highschool Campus, Mumbai - 400001.
Provisional Allotment Letter of CAP Round 1 by Counselling for Admission to M - Pharmacy
2015 - 2016

Sponsorship Status : Non Sponsored **Application ID : MPH15102743** **GPAT Status : Non GPAT Candidate** **CET Score :55**

Personal Details :

Full Name GHORPADE ANUJA MACCHINDRA 

Nationality Indian **Gender** Female

Category-Caste OPEN- Open **Type of Candidature** Type A

PH Type Not Applicable **Date of Birth** 20/03/1994

Annual Family Income (₹) < 1,00,000

Qualification Details

Examination	Marks Obtained	Out of	Percentage
B.Pharmacy	Appearing	Appearing	Appearing

Merit Details :

State Level General Merit No. 1730 **Category Merit No.** -

Allotment Details

Choice Code S18512510

Course Quality Assurance

Institute Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar

Seat Type NH

NOTE: The candidate has paid Rs.5000/- In CASH As a partial payment.
Declaration by Candidate

I hereby agree to conform to rules, acts and laws enforced by Government, I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the institute/college will have rights to expel, rusticate me from the institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.
Reporting to the institute as per allotment : 23-06-2015 To 03-07-2015

Date: 24/6/15 **Place:** Aurangabad

Signature of The Candidate (GHORPADE ANUJA MACCHINDRA)

Allotted On: 24-06-2015 16:45:15 **Allotted By:** adminnawale **Printed On:** 24-06-2015 16:45:19 **Printed By:** adminnawale

OFFICE USE ONLY

Seal of adminnawale **Signature of Authorised Officer (adminnawale)**

Last Modified By: MPH15102743 **Last Modified on:** 08-05-2015 16:27:40

Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736

Joint Director (Admin.)
Technical Education (R.O.)

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PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

GITE SAMBHAJI TUKARAM

Provisional Allotment Letter of CAP Round 2 by Counselling for Admission to M - Pharmacy 2015 - 2016

338

DIRECTORATE OF TECHNICAL EDUCATION, MAHARASHTRA STATE, MUMBAI.
3, Mahapalika Marg, Elphinstone Technical Highschool Campus, Mumbai - 400001.

Sponsorship Status : Non Sponsored

Application ID : MPH15103919

GPAT Status : GPAT Candidate

GPAT Score : 162

GPAT Rank : 10525

Personal Details :

Full Name : GITTE SAMBHAJI TUKARAM

Nationality : Indian

Gender : Male

Category-Caste : OPEN- Open

Type of Candidature : Type A

PH Type : Not Applicable

Date of Birth : 25/02/1993

Annual Family Income (₹) : < 1,00,000

Qualification Details :

Examination : B.Pharmacy

Marks Obtained :

Out of :

Appearing :

Percentage :

Merit Details :

State Level General Merit No. : 130

Category Merit No. : -

Allotment Details :

Choice Code : 518582210

Course : Pharmaceutical Chemistry

Institute : Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar

Seat Type : NO

NOTE: The candidate has paid Rs.5000/- In CASH As a partial payment.

Declaration by Candidate

I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the institute/college will have rights to expel, rusticate me from the institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

Reporting to the Institute as per allotment : 09-07-2015 To 15-07-2015

Date : 10/07/2015

Place : Aurangabad

Allotted On : 10-07-2015 16:24:25

Allotted By : adminnawale

Printed On : 10-07-2015 16:24:27

Printed By : adminnawale

Signature of The Candidate : S. Gite (GITTE SAMBHAJI TUKARAM)

OFFICE USE ONLY

Seal of adminnawale

Last Modified By : MPH15103919

Signature of Authorised Officer (adminnawale)

Last Modified on : 08-05-2015 12:16:11

Joint Director (Admin.)
Technical Education (R.O.)
Aurangabad.

Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-41373

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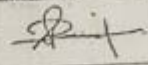
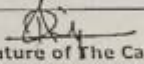
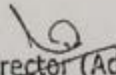
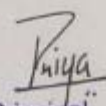


**PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI**

CODE PRIYANKA GHANSHAM

(13/6)

DIRECTORATE OF TECHNICAL EDUCATION, MAHARASHTRA STATE, MUMBAI
3, Mahapalika Marg, Upperstone Technical High School Campus, Mumbai - 400001
Provisional Allotment Letter of CAP Round 1 by Counseling for Admission to B. Pharmacy
2015 - 2016

Sponsorship Status : Non Sponsored	Application ID : MPH15102761	GPAT Status : Non GPAT Candidate	CET Score : 47	
Personal Details :				
Full Name	CODE PRIYANKA GHANASHAM		 	
Nationality	Indian	Gender		Female
Category-Caste	OPEN- Open	Type of Candidature		Type A
PH Type	Not Applicable	Date of Birth		07/12/1993
Annual Family Income (₹)	< 1,00,000			
Qualification Details				
Examination	Marks Obtained	Out of	Percentage	
B.Pharmacy	Appearing	Appearing	Appearing	
Merit Details :				
State Level General Merit No.	2718	Category Merit No. -		
Allotment Details				
Choice Code	518582210			
Course	Pharmaceutical Chemistry			
Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar			
Seat Type	NH			
NOTE: The candidate has paid Rs.5000/- In DD(DD Number :008000) As a partial payment. Declaration by Candidate				
I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the Institute/college will have rights to expel, rusticate me from the institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above. Reporting to the institute as per allotment : 23-06-2015 To 03-07-2015				
Date: 25-6-15	 Signature of The Candidate (CODE PRIYANKA GHANASHAM)			
Place: Aurangabad				
Allotted On: 25-06-2015 16:05:10	Allotted By: adminnawale	Printed On: 25-06-2015 16:05:13	Printed By: adminnawale	
OFFICE USE ONLY				
Seal of adminnawale		Signature of Authorised Officer (adminnawale)		
Last Modified By: MPH15102761		Last Modified on: 08-06-2015 16:20:29		
 Joint Director (Admin.) Technical Education (R.O.) Aurangabad.		 Principal Pravara Rural College of Pharmacy Pravaranagar, A/p. Loni-413736		

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PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

JADHAV POOJA GORAKSHNATH

ipt-cum-Acknowledgement of Allotment Form - Pharmacy 2015... http://npharm15.dtemaharashtra.org/npharm15/institute_report.php

440

DIRECTORATE OF TECHNICAL EDUCATION, MAHARASHTRA STATE, MUMBAI.
3, Mahapalika Marg, Elphinstone Technical Highschool Campus, Mumbai - 400001.
Provisional Allotment Letter of CAP Round 1 by Councelling for Admission to M - Pharmacy
2015 - 2016

Sponsorship Status : Non Sponsored	Application ID : MPH15100727	GPAT Status : Non GPAT Candidate	CET Score :79	
Personal Details :				
Full Name	JADHAV POOJA GORAKSHNATH			
Nationality	Indian	Gender		Female
Category-Caste	OPEN- Open	Type of Candidature		Type A
PH Type	Not Applicable	Date of Birth		09/10/1992
Annual Family Income (₹)	< 1,00,000			
Qualification Details				
Examination	Marks Obtained	Out of	Percentage	
B.Pharmacy	Appearing	Appearing	Appearing	
Merit Details :				
State Level General Merit No.	722	Category Merit No.	-	
Allotment Details				
Choice Code	518512510			
Course	Quality Assurance			
Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar			
Seat Type	NH			
NOTE: The candidate has paid Rs.5000/- In DD(DD Number :002235) As a partial payment.				
Declaration by Candidate				
I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the institute/college will have rights to expel, suspend me from the institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.				
Reporting to the institute as per allotment : 23-06-2015 To 03-07-2015				
Date: 23-6-2015	Signature of The Candidate (JADHAV POOJA GORAKSHNATH)			
Place : A. had.				
Allotted On: 23-06-2015 19:08:10	Allotted By: adminnawale	Printed On: 23-06-2015 19:08:13	Printed By: adminnawale	
OFFICE USE ONLY				
Seal of adminnawale	Signature of Authorised Officer (adminnawale)			
Last Modified By: MPH15100727	Last Modified on: 08-05-2015 14:37:13			
Joint Director (Admin.) Technical Education (R.O.) Aurangabad.		Principal Pravara Rural College of Pharmacy Pravaranagar, A/p. Loni-413733 06/23/2015 7:08 PM		

1 of 1

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PRAVARA RURAL EDUCATION SOCIETY'S

PRAVARA RURAL COLLEGE
OF PHARMACY

LONI

KHAMKAR RUPALI RAVINDRA

DIRECTORATE OF TECHNICAL EDUCATION, MAHARASHTRA (STATE BOARD)
J, Mahatma Marg, Ektone, Technical Education Campus, Mumbai - 400 011
Provisional Allotment Letter of CAP Round 1 by Counselling for Admission to B. Pharmacy
2015 - 2015

Sponsorship Status : Non-sponsored **Application ID : MPH15102721** **GPAT Status : Non GPAT Candidate** **CEE Score : 48**

Personal Details :

Full Name	KHAMKAR RUPALI RAVINDRA		
Nationality	Indian	Gender	Female
Category-Caste	SC- Chambhar	Type of Candidature	Type A
PH Type	Not Applicable	Date of Birth	15/08/1993
Annual Family Income (₹)	< 1,00,000		

Qualification Details

Examination	Marks Obtained	Out of	Percentage
B. Pharmacy	Appearing	Appearing	Appearing

Merit Details :

State Level General Merit No.	2644	Category Merit No.	-
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Allotment Details

Choice Code	S18582210
Course	Pharmaceutical Chemistry
Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Seat Type	SCST

Declaration by Candidate

I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of college/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the Institute/college will have rights to expel, rusticate me from the institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.
Reporting to the institute as per allotment : 23-06-2015 To 03-07-2015

Re: 27/06/2015
Place: Aurangabad

Signature of The Candidate (KHAMKAR RUPALI RAVINDRA)

Printed On: 27-06-2015 14:52:08
Printed By: adminnawale

Seal of adminnawale **Signature of Authorised Officer (adminnawale)**

Modified By: MPH15102721 **Last Modified on:** 06-05-2015 16:50:33

**Joint Director (Admin.)
Technical Education (R.O.)
Aurangabad.**

**Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736**

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PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

JADHAV VISHAL BABASAHEB

SAVITRIBAI PHULE PUNE UNIVERSITY

(formerly University of Pune)

GANESHKHIND, PUNE 411 007.



Passing Certificate

This is to certify that

Sri: JADHAV VISHAL BABASAHEB

Mother's Name: YADONA

Has appeared for the B.Sc. DEGREE OF PHARMACY (Rev. 2013) D.A. TECHNIQUES examination held in month of June 2017 and declared to have passed the examination with 'B' grade.

This is further to certify that he is eligible for the aforesaid Degree Certificate, whenever he applies for the same at the University Convocation.

Seat No. 11494

P. R. No. 2451500787

College code: 0635


PRINCIPAL
Pravara Rural College of Pharmacy
Pimpri-Chinchwad, Pune-411 007



14 FEB 2018

DATE: 12 JULY 2017

Prof. (Dr.) Ashok M. Chavan
Director,

Board of Examinations & Evaluation
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SAVITRIBAI PHULE PUNE UNIVERSITY

Formerly University of Pune
GANESHIKHIND, PUNE-411 007.

STATEMENT OF MARKS FOR MASTER OF PHARMACY (REV. 2013) QUALITY ASSURANCE
TECHNIQUES

SEAT NO: 11478 CENTRE: 03
NAME: JADHAV VISHAL BABASAHEB PERM REG. NO: 2451500187
COLLEGE: 0433 DR. D. V. PATIL COLG. OF PHARM. MOTHER: VANDANA

YEAR - JUNE 2017	NAME OF THE COURSE	INT	EX	TOT	DIG	AGE	GR
1	ADVANCED ANALYTICAL TECHNIQUES	34	28	62	P 04	A	032
	ADVANCED ANALYTICAL TECHNIQUES (PRACTICAL)	39	32	76	P 04	A+	036
	RESEARCH METHODOLOGY	23	27	50	P 04	B	024
	STERILE PRODUCTS FORMULATION & TECHNOLOGY	25	29	54	P 03	B	018
	ADVANCED QUALITY ASSURANCE TECHNIQUES	33	25	58	P 04	B+	028
	ADVANCED QUALITY ASSURANCE TECHNIQUES (PRACTICAL)	35	36	69	P 04	A	032
	SEMINAR	41	-	41	P 02	C	020
2	DRUG REGULATORY AFFAIRS	34	30	64	P 04	A	032
	PHARMACEUTICAL VALIDATION	25	28	53	P 04	B	024
	PHARMACEUTICAL VALIDATION (PRACTICAL)	37	38	75	P 04	A+	036
	QUALITY PLANNING AND ANALYSIS	34	33	67	P 04	A	032
	SEMINAR	33	-	33	P 02	A	016
	RESEARCH WORK	39	-	39	P 06	A+	034
	BIOPHARMACEUTICS AND PHARMACOKINETICS	29	22	51	P 03	B	018
3	SEMINAR ON RESEARCH ENVITAGED FOR DISSERTATION	39	-	39	P 04	A+	036
	SEMINAR ON RECENT TRENDS IN QUALITY ASSURANCE TECHNIQUES	37	-	37	P 04	A+	036
	RESEARCH WORK	112	-	112	P 18	A+	162
4	SEMINAR ON DISSERTATION	40	-	40	P 04	C	040
	RESEARCH WORK,DISSERTAION & DEFENSE - (VIVA/VOICE)	100	80	180	P 18	A+	162
SEAT : (1) 7.600(2) 7.850(3) 9.000(4) 9.180					TOTAL 100		
PER MARKS : 1200/1800 (66.67%)		CGPA : 8.380			FINAL GRADE : A		



P. Singh
PRINCIPAL
Pravara Rural College of Pharmacy
Pravara, Loni, Dist. A. N. 413735

[Signature]
Director,

Medium of instruction: English

Board of Examinations & Evaluation

STATEMENT NO:

DATE: 12 JUN 2017



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

KHEMNAR KAVITA BHAUSAHEB



DIRECTORATE OF TECHNICAL EDUCATION, MAHARASHTRA STATE, MUMBAI.
3, Mahapalika Marg, Elphinstone Technical Highschool Campus, Mumbai - 400001.
Provisional Allotment Letter of CAP Round 1 by Counselling for Admission to M - Pharmacy
2015 - 2016

Sponsorship Status : Non Sponsored	Application ID : MPH15102786	GPAT Status : Non GPAT Candidate	CET Score : 61	
Personal Details :				
Name	KHEMNAR KAVITA BHAUSAHEB		 Khemnkar K.B	
Nationality	Indian	Gender		Female
Category-Caste	OPEN- Open	Type of Candidature		Type A
Type	Not Applicable	Date of Birth		03/11/1993
Annual Family Income (₹)	< 1,00,000			

Qualification Details			
Examination	Marks Obtained	Out of	Percentage
Pharmacy	Appearing	Appearing	Appearing

Merit Details :	
State Level General Merit No.	1286
Category Merit No.	-

Allotment Details	
Choice Code	518512510
Course	Quality Assurance
Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Seat Type	NH

NOTE: The candidate has paid Rs.5000/- In CASH As a partial payment.
Declaration by Candidate

I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I understand that the Principal/Director of the Institute/college will have rights to expel, rusticate me from the Institute, for any violation of the rules prescribed by the college/institute/university/Government and the undertaking given above.
Reporting to the Institute as per allotment : 23-06-2015 To 03-07-2015

Date: 24/6/2015	Signature of The Candidate (KHEMNAR KAVITA BHAUSAHEB)		
Place: Aurangabad			
Allotted On: 24-06-2015 12:28:37	Allotted By: adminnawale	Printed On: 24-06-2015 12:28:41	Printed By: adminnawale

OFFICE USE ONLY

Seal of adminnawale	Signature of Authorised Officer (adminnawale)
Last Modified By: MPH15102786	Last Modified on: 08-05-2015 18:26:28

Joint Director (Admin.)
Technical Education (R.O.)
Aurangabad.

Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736



**PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI**

KUTE NIKHIL NARAYAN

Receipt-cum-Acknowledgment of Allotment Form - Pharmacy 2015. <http://pharm15.dte.nar.edu.in/applyform15/index.php>



DIRECTORATE OF TECHNICAL EDUCATION, MAHARASHTRA STATE, MUMBAI.
3, Mahapalika Marg, Elphinstone Technical Industrial Campus, Mumbai - 400013.
Provisional Allotment Letter of CAP Round 2 by Counseling for Admission to M - Pharmacy
2015 - 2016

Sponsorship Status : Non Sponsored	Application ID : MPH15104261	GPAT Status : Non GPAT Candidate	CET Score : 46	
Personal Details :				
Full Name	KUTE NIKHIL NARAYAN			
Nationality	Indian	Gender		Male
Category-Caste	OPEN- Open	Type of Candidature		Type A
PH Type	Not Applicable	Date of Birth		24/10/1999
Annual Family Income (₹)	3,50,001 - 4,00,000			

Qualification Details			
Examination	Marks Obtained	Out of	Percentage
B.Pharmacy	Appearing	Appearing	Appearing

Merit Details :	
State Level General Merit No.	2973
Category Merit No.	-

Allotment Details	
Choice Code	518582210
Course	Pharmaceutical Chemistry
Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Seat Type	NO

NOTE: The candidate has paid Rs.5000/- In CASH As a partial payment.
Declaration by Candidate

I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the Institute/College will have rights to expel, extradite me from the Institute, for any infringement of the rules prescribed by the College/Institute/University/Government and the undertaking given above.
Reporting to the Institute as per allotment : 09-07-2015 To 15-07-2015

Date:	10/07/15	Signature of The Candidate (KUTE NIKHIL NARAYAN)	
Place:	Aurangabad		
Allotted On: 10-07-2015 16:43:26	Allotted By: adminnawale	Printed On: 10-07-2015 16:43:26	Printed By: adminnawale

OFFICE USE ONLY	
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Seal of adminnawale	Signature of Authorised Officer (adminnawale)
Last Modified By: MPH15104261	Last Modified on: 08-05-2015 23:58:47

Joint Director (Admin.)
Technical Education (R.O.)
Aurangabad.

Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736



PRAVARA RURAL EDUCATION SOCIETY'S

PRAVARA RURAL COLLEGE
OF PHARMACY

LONI

MORE PPRIYANKA HIRAMAN

State Common Entrance Test Cell, Maharashtra State, Mumbai
305, Government Polytechnic Building, 49, Kherwadi, Dandara (E), Mumbai 400051. (M.S.)
Provisional Allotment for CAP Round - I for Admission to First Year Of Two Year Full Time
Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2016 - 2017
Published On : 29-07-2016 at 06:00 PM

Application ID : MPH16103000 | GPAT Score: 64

Personal Details

Full Name	MORE PRIYANKA HIRAMAN	Date of Birth	21-12-1992
Gender	Female		
Category-Caste	OBC - Tel (181)		
PWD Type	Not Applicable		
Religious Minority	N.A.		
Linguistic Minority	N.A.		
Type of Candidature	Maharashtra State Candidate - Type A		

Qualification Details

Examination	Obtained	Percentage
B.Pharmacy Aggregate :	609/1200	67.42

Merit Details

State Level General Merit No.	1488
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Status of Provisional Allotment Details for CAP Round - I

Choice Code Alloted	518512610		
Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar		
Course	Quality Assurance Techniques		
Seat Type	GOBC	Preference No. Alloted	1

IMPORTANT INSTRUCTIONS :

- The Candidate is required to provide Application ID and Password at the time of Seat acceptance at ARC.
- The Candidate is required to submit all the original documents mention on Receipt-Cum Acknowledgement of Application Form.
- ARC should verify the documents which are listed in Candidate's Receipt-Cum-Acknowledgement

Printed On: 10-08-2016 12:30:43 PM | Printed By: MPH16103000
URL: <http://mpharm16.stemaharashtra.org/mpharm16/index.php/allotment/displayallotment?id=MTAzMdAw&md=MQ==>
id=MTAzMdAw&md=MQ==

Principal
Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736

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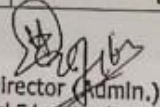


PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

MALI SHUBHANGI RAOSAHEB

(1820)

DIRECTORATE OF TECHNICAL EDUCATION, MAHARASHTRA STATE, MUMBAI
3, Mahapalka Marg, Elphinstone Technical High School Campus, Mumbai 400011
Provisional Allotment Letter of CAP Round 1 by Counselling for Admission to B - Pharmacy
2015 - 2016

Sponsorship Status : Non Sponsored	Application ID : MPH15103880	GPAT Status : Non GPAT Candidate	CET Score :50	
Personal Details :				
Full Name	MALI SHUBHANGI RAOSAHEB		 <i>Signature</i>	
Nationality	Indian	Gender		Female
Category-Caste	ST- Bhill	Type of Candidature		Type A
PH Type	Not Applicable	Date of Birth		31/03/1993
Annual Family Income (₹)	> 5,00,000			
Qualification Details				
Examination	Marks Obtained	Out of	Percentage	
Pharmacy	Appearing	Appearing	Appearing	
Merit Details :				
State Level General Merit No.	2364	Category Merit No.	-	
Allotment Details				
Choice Code	S18512510			
Course	Quality Assurance			
Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar			
Seat Type	SCST			
Declaration by Candidate				
I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the institute/college will have rights to expel, rusticate me from the institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above. Reporting to the Institute as per allotment : 23-06-2015 To 03-07-2015				
Date: 27/6/2015	Signature of the Candidate (MALI SHUBHANGI RAOSAHEB)			
Place: Aurangabad	Printed By: adminnawale			
Allotted On: 27-06-2015 11:15:52	Allotted By: adminnawale	Printed On: 27-06-2015 11:15:54	Printed By: adminnawale	
OFFICE USE ONLY				
Seal of adminnawale	Signature of Authorised Officer (adminnawale)			
Last Modified By: MPH15103880	Last Modified on: 08-05-2015 17:12:59			
 Joint Director (Admin.) Technical Education (R.O.) Aurangabad.		 Principal Pravara Rural College of Pharmacy Pravaranagar, A/p. Loni-413736		
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NIGHUTE PRIYANKA RAMESH

[illegible]



PRAVARA RURAL EDUCATION SOCIETY'S

PRAVARA RURAL COLLEGE
OF PHARMACY

LONI

NIRHALI SIDDHARTH DILIP

State Common Entrance Test Cell, Maharashtra State, Mumbai
305, Government Polytechnic Building, 49, Kherwadi, Dandara (E), Mumbai 400051. (M.S.)
Provisional Allotment for CAP Round - I for Admission to First Year Of Two Year Full Time
Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2016 - 2017
Published On : 29-07-2016 at 06:00 PM

Application ID : MPH16101189 | GPAT Score: 84

Personal Details		
Full Name	NIRHALI SIDDHARTH DILIP	
Gender	Male	Date of Birth
Category-Caste	SBC -Sali (3) (SBC / OBC)	
PWD Type	Not Applicable	
Religious Minority	N.A.	
Linguistic Minority	N.A.	
Type of Candidature	Maharashtra State Candidate - Type A	

Examination	Qualification Details	Percentage
B.Pharmacy Aggregate :	Obtained	59.73
	2867/4800	

State Level General Merit No. 944

Status of Provisional Allotment Details for CAP Round - I

Choice Code Allotted	S18592210	
Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar	
Course	Pharmaceutical Chemistry	
Seat Type	GOPEN	Preference No. Allotted
		1

IMPORTANT INSTRUCTIONS :

- The Candidate is required to provide Application ID and Password at the time of Seat acceptance at ARC.
- The Candidate is required to submit all the original documents mention on Receipt-Cum Acknowledgement of Application Form.
- ARC should verify the documents which are listed in Candidate's Receipt-Cum-Acknowledgement

Printed On: 10-08-2016 11:57:16 AM Printed By: MPH16101189

URL: <http://mpharm16.dtemaharashtra.org/mpharm16/index.php/allotment/displayallotment?id=MTAxMTg5&rnd=MQ==>

Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736

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PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

PATEL SALMAN



सहसंचालक तंत्रशिक्षण विभागीय कार्यालय, नाशिक

राष्ट्रीय तंत्रशिक्षण परिषद, सततगर्व रोड नाशिक-रोड, नाशिक
☎ : 2401479, Fax : 2456301 E-Mail: rontatshik.dto@gmail.com.
Website: www.dtmak.org

जा.फ.तंत्रि/सिवासा/तांशा/ अ.शास्त्र./२०१५/२८४६

दिनांक :- १७/११/२०१५

प्रति,
जा.आयुधरा,
राज्य शासनाधिकार प्रवेश वारीना नाशिक,
प्रवेश विभागक प्राधिकरण,
४९, अलिचावर जंग जार्ज,
शासकीय तंत्रशिक्षण, मुंबई परिसर,
कोरवाडी, महाराष्ट्र (पूर्व).
मुंबई-४०० ०५१.

विषय :- शैक्षणिक वर्ष २०१५-१६ मधील महाराष्ट्र शासनाच्या शिर्षीटी मध्ये सलगामी झालेल्या
विभागातूनूनित संस्थांमधील प्रथम वर्ष औद्योगिकशास्त्र पदव्युत्तर पदवी
अभ्यासक्रमाच्या गुणवत्ता यादीत मान्यता देण्यात.
(एम.फार्म-५१८५).

महोदय,

उपरोक्त विभागाच्या अनुसंगीत आधारात समूह करण्यात येते की, प्रथम एअर कॉलेज ऑफ
फॉर्मसी, लोनी, जि.अहमदनगर या विभागातूनूनित शिर्षीटी-शैक्षणिक वर्ष-२०१५-१६ मधील प्रथम वर्ष एम.फार्म
पदव्युत्तर पदवी अभ्यासक्रमाच्या गुणवत्ता यादीची पडताळणी या विभागीय कार्यालयातूनूनित करण्यात आलेली
असून सदर गुणवत्ता यादीची पडताळणी करताना कोणत्याही प्रकारच्या चुटी आढळलेल्या नाहीत.



आपला,

अहमदनगर
तंत्रशिक्षण विभागीय कार्यालय, नाशिक.

प्रत :- माहिती व आवश्यक त्या सार्वयागरीसाठी रवाना,
१. जा. कृताश्रमि, सावित्रीबाई फुले पुणे विद्यापीठ, पुणे
२. जा. संचालक, तंत्रशिक्षण संचालनालय, अ.शा.मुंबई
३. प्राचार्य, प्रथम एअर कॉलेज ऑफ फॉर्मसी, लोनी, जि.अहमदनगर

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PRINCIPAL
Pravara Rural College of Pharmacy
Pravaranagar, A.P. Loni-413736

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**PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI**



DIRECTORATE OF TECHNICAL EDUCATION, MAHARASHTRA STATE, MUMBAI

3, Mahapalika Marg, Elphinstone Technical Highschool Campus, Mumbai - 400001.

S105 - Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar

[518512510] - Quality Assurance

List of admitted candidates to M - Pharmacy 2015 - 2016

Quota : 18

Admitted Candidates List In CAP Rounds

Sr.No.	Merit No	Application ID	Name	Gender	Candidate Type	Category	PI/ DEF Type	Sponsorship Status	GPAT Status	GPAT RANK	CET Score	EPPharmacy %	Seat Type	Fees Paid (₹)
13	1411	MPH15103227	GADE GOLESH LEONAY	M	Type A	OPEN	Ex service men	Non-Sponsored	Non-GPAT	-	50	Appearing	GA	06-3000
14	1879	MPH15103993	DHOKA DARSHAN MINAY	M	Type A	OPEN		Non-Sponsored	Non-GPAT	-	34	Appearing	GA	6815-1000
15	186	MPH15101010	SHRISHANGI SANGHANI PRALAKH	F	Type A	OPEN		Non-Sponsored	GPAT	0738	-	Appearing	GA	20-1000
✓ 16	1670	MPH15103799	PATEL SAUMEN RAJU	M	Type A	OPEN		Non-Sponsored	Non-GPAT	-	53	Appearing	GA	1000-1000
17	12674	MPH15102540	PHATANGARE KASHEVAL BAPUSAHIB	F	Type A	OPEN		Non-Sponsored	Non-GPAT	-	48	Appearing	GA	12315-1000
18	502	MPH15103555	PADE SHUBHAM DILIP	M	Type A	OPEN		Non-Sponsored	GPAT	2020	-	Appearing	GA	1000-1000

Printed on: 31/10/2015 09:36:49 Seal of the Institute



Signature of The
Director/Principal

Page 2/3



PRINCIPAL
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413718

Principal
PRINCIPAL
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736

open
25



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

PHALKE SHUBHANGI SAMBHAJI

 **DIRECTORATE OF TECHNICAL EDUCATION, MAHARASHTRA STATE, MUMBAI**
3, Mahapekka Marg, Elphinstone Technical High School Campus, Mumbai - 400001.
Provisional Allotment Letter of CAP Round 2 by Councelling for Admission to M - Pharmacy
2015 - 2016

Sponsorship Status : Non Sponsored	Application ID : MPH15101010	GPAT Status : GPAT Candidate	GPAT Score : 155	GPAT Rank : 0738
Personal Details :				
Full Name	SHUBHANGI SAMBHAJI PHALAKE			 <i>Shubhangi</i>
Nationality	Indian	Gender	Female	
Category-Caste	OPEN- Open	Type of Candidature	Type A	
PH Type	Not Applicable	Date of Birth	27/10/1993	
Annual Family Income (₹)	< 1,00,000			
Qualification Details				
Examination	Marks Obtained	Out of	Percentage	
B.Pharmacy	Appearing	Appearing	Appearing	
Merit Details :				
State Level General Merit No.	186	Category Merit No.	-	
Allotment Details				
Choice Code	518512510			
Course	Quality Assurance			
Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar			
Seat Type	NA			

Remark By adminnawale: Betterment

NOTE: The candidate has paid Rs.5000/- In CASH As a partial payment.
Declaration by Candidate

I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the institute/college will have rights to expel, rusticate me from the institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.
Reporting to the institute as per allotment : 09-07-2015 To 15-07-2015

Date: 01/12/2015	Signature of The Candidate (SHUBHANGI SAMBHAJI PHALAKE)		
Place: Pravaranagar			
Allotted On: 09-07-2015 10:24:59	Allotted By: adminnawale	Printed On: 09-07-2015 10:25:01	Printed By: adminnawale

OFFICE USE ONLY

Seal of adminnawale	Signature of Authorised Officer (adminnawale)
Last Modified By: MPH15101010	Last Modified on: 04-05-2015 13:07:08

Joint Director (Admin.)
Technical Education (R.O.)
Aurangabad.

Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736

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**PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI**

PUALTE SUJATA EKNATH

1310

Directorate of Technical Education, Maharashtra State, Mumbai
1, Maharashtra Plaza, 1, Parel Road, Technical Education Campus, Mumbai - 400001
Provisional Allotment Letter of CAP Round 1 by Council Reg for Admission to B- Pharmacy
2015 - 2016

Sponsorship Status : Non Sponsored	Application ID : MPH15103899	GPAT Status : Non GPAT Candidate	CEI Score : 47
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Personal Details :

Full Name	PUALTE SUJATA EKNATH		
Nationality	Indian	Gender	Female
Category-Caste	OPEN- Open	Type of Candidature	Type A
PH Type	Not Applicable	Date of Birth	17/10/1993
Annual Family Income (₹)	< 1,00,000		

Qualification Details

Examination	Marks Obtained	Out of	Percentage
B.Pharmacy	Appearing	Appearing	Appearing

Merit Details :

State Level General Merit No.	2712	Category Merit No.	-
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Allotment Details

Choice Code	518582210
Course	Pharmaceutical Chemistry
Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Seat Type	NRI

NOTE: The candidate has paid Rs.5000/- In DD(DD Number : 226936) As a partial payment.
Declaration by Candidate

I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the institute/college will have rights to expel, rusticate me from the institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.
Reporting to the institute as per allotment : 23-06-2015 To 03-07-2015

Date: 25/6/2015	Signature of The Candidate (PUALTE SUJATA EKNATH)		
Place: Aurangabad			
Allotted On: 25-06-2015 16:01:16	Allotted By: adminnawale	Printed On: 25-06-2015 16:01:21	Printed By: adminnawale

OFFICE USE ONLY

Seal of adminnawale	Signature of Authorised Officer (adminnawale)
Last Modified By: MPH15103899	Last Modified on: 08-05-2015 11:55:53

Joint Director (Admin.)
Technical Education (R.O.)
Aurangabad.

Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736

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PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

SHAIKH SHOIB SHAKIL

NO.: 17- 0075541

SAVITRIBAI PHULE PUNE UNIVERSITY
(formerly University of Pune)
GANESHKHIND, PUNE 411 007.

STATEMENT OF MARKS FOR MASTER OF PHARMACY (Rev.2013) QUALITY ASSURANCE TECHNIQUES

SEAT NO. 11591 CENTRE 15 PERM REG. NO.: 2451500834
NAME SHAIKH SHOHED SHAKIL MOTHER : SHIRIN
COLLEGE 0773 AMRUTVAHINI COP, SANGANNER

YEAR : JUNE 2017

SEM.	NAME OF THE COURSE	INT	UEX	TOT	DITS	ADE	GP
1	ADVANCED ANALYTICAL TECHNIQUES	37	27	64	P 04	A	032
	ADVANCED ANALYTICAL TECHNIQUES (PRACTICAL)	43	40	83	P 04	O	040
	RESEARCH METHODOLOGY	32	27	59	P 04	B+	028
	STERILE PRODUCTS FORMULATION & TECHNOLOGY	40	30	70	P 03	A+	027
	ADVANCED QUALITY ASSURANCE TECHNIQUES	35	26	61	P 04	A	032
	(PRACTICAL)						
	SEMINAR	44	41	85	P 04	O	040
2	DRUG REGULATORY AFFAIRS	46	-	46	P 02	O	020
	PHARMACEUTICAL VALIDATION	42	22	64	P 04	A	032
	PHARMACEUTICAL VALIDATION (PRACTICAL)	38	32	70	P 04	A+	036
	QUALITY PLANNING AND ANALYSIS	46	42	88	P 04	O	040
	SEMINAR	44	25	69	P 04	A	032
	RESEARCH WORK	46	-	46	P 02	O	020
	PHARMACEUTICAL PLANT DESIGN & OPERATIONS	42	-	42	P 06	O	060
3	SEMINAR ON RESEARCH ENVISAGED FOR DISSERTATION	42	22	64	P 03	A	024
	SEMINAR ON RECENT TRENDS IN QUALITY ASSURANCE TECHNIQUES	41	-	41	P 04	O	040
	RESEARCH WORK	41	-	41	P 04	O	040
4	SEMINAR ON DISSERTATION	141	-	141	P 18	O	180
	RESEARCH WORK, DISSERTATION & DEFENSE - (VIVA/VOCE)	38	-	38	* 04	A+	036
		111	61	172	* 18	A	144
	CGPA : (1) 8.760(2) 9.040(3) 10.000(4) 8.180			TOTAL 100			903
	TOT. MARKS : 1344/1800 (74.67%)			CGPA : 9.030		FINAL GRADE : O	

Medium of instruction: English

Principal
Pravara Rural College of Pharmacy
Pravarasagar, A.M. Loni (M.S.)

Director
Board of Examinations & Evaluation

STATEMENT NO.:
DATE: 12 JULY 2017



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

SONUNE SWAPNALI SARANGDHAR

Provisional Allotment Letter of CAP Round 2 by Counselling for Admission to M - Pharmacy 2015 - 2016

Sponsorship Status : Non Sponsored	Application ID : MPH15103359	GPAT Status : Non GPAT Candidate	CET Score : 47
Personal Details :			
Full Name	SWAPNIL SARANGDHAR SONUNE		
Nationality	Indian	Gender	Male
Category-Caste	OPEN- Open	Type of Candidature	Type A
PH Type	Not Applicable	Date of Birth	20/03/1992
Annual Family Income (₹)	< 1,00,000		
Qualification Details			
Examination	Marks Obtained	Out of	Percentage
B.Pharmacy	Appearing	Appearing	Appearing
Merit Details :			
State Level General Merit No.	2717	Category Merit No.	-
Allotment Details			
Choice Code	510582210		
Course	Pharmaceutical Chemistry		
Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar		
Seat Type	NO		
NOTE: The candidate has paid Rs.5000/- In CASH As a partial payment.			
Declaration by Candidate			
I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the Institute/college will have rights to expel, rusticate me from the Institute, for any infringement of the rules prescribed by the college/Institute/university/Government and the undertaking given above. Reporting to the Institute as per allotment : 09-07-2015 To 15-07-2015			
Date: 10-7-15	Signature of The Candidate (SWAPNIL SARANGDHAR SONUNE)		
Place : A. bud	Printed On: 10-07-2015 16:41:54		
Allotted On: 10-07-2015 16:41:52	Allotted By: adminnawale	Printed By: adminnawale	
OFFICE USE ONLY			
Seal of adminnawale	Signature of Authorised Officer (adminnawale)		
Last Modified By: MPH15103359	Last Modified on: 07-05-2015 13:55:22		
Joint Director (Admin.) Technical Education (R.O.) Aurangabad.			
Principal Pravara Rural College of Pharmacy Pravaranagar, A/p. Loni- 413736			



**PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI**

VIKHE DATTAPRASAD NAVNATH

1-cum-Acknowledgement of Allotment Form - Pharmacy 2015 - <http://npharm15.dreamarashtra.org/npdca/npdca.htm>

DIRECTORATE OF TECHNICAL EDUCATION, MAHARASHTRA STATE, MUMBAI.
3, Mahapalika Marg, Elphinstone Technical Highschool Campus, Mumbai - 400001.
Provisional Allotment Letter of CAP Round 1 by Councelling for Admission to M - Pharmacy
2015 - 2016

Sponsorship Status : Non Sponsored **Application ID : MPH15103946** **GPAT Status : Non GPAT Candidate** **CET Score : 42**

Personal Details :

Full Name	VIKHE DATTAPRASAD NAVNATH		
Nationality	Indian	Gender	Male
Category-Caste	OPEN- Open	Type of Candidature	Type A
PH Type	Not Applicable	Date of Birth	28/12/1993
Annual Family Income (₹)	< 1,00,000		

Qualification Details

Examination	Marks Obtained	Out of	Percentage
B.Pharmacy	Appearing	Appearing	Appearing

Merit Details :

State Level General Merit No.	3453	Category Merit No.	-
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Allotment Details

Choice Code	S185B1910
Course	Pharmacognosy
Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravararanagar
Seat Type	NH

NOTE: The candidate has paid Rs.5000/- In DD(DD Number : 226947) As a partial payment.
Declaration by Candidate

I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the institute/college will have rights to expel, rusticate me from the institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.
Reporting to the institute as per allotment : 23-06-2015 To 03-07-2015

Date: 26/6/15
Place: Aurangabad

Signature of The Candidate
(VIKHE DATTAPRASAD NAVNATH)

Printed On: 26-06-2015 13:29:41
Printed By: adminnawale

OFFICE USE ONLY

Seal of adminnawale	Signature of Authorised Officer (adminnawale)
Last Modified By: MPH15103946	Last Modified on: 08-05-2015 12:33:18

Joint Director (Admin.)
Technical Education (R.O.)
Aurangabad.

Principal
Pravara Rural College of Pharmacy
Pravararanagar, A/p. Loni- 413 736

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PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

SURADKAR ASHWIN SANJAY

DIRECTORATE OF TECHNICAL EDUCATION, MAHARASHTRA STATE, MUMBAI
3, Mahapadma Marg, Udhinstone Technical Highschool Campus, Mumbai - 400001.
Provisional Allotment Letter of CAP Round 1 by Counselling for Admission to M - Pharmacy
2015 - 2016

Sponsorship Status : Non sponsored **Application ID : MPH15102776** **GPAT Status : Non GPAT Candidate** **CET Score :56**

Personal Details :

Full Name	SURADKAR ASHWIN SANJAY		
Nationality	Indian	Gender	Male
Category-Caste	OPEN- Open	Type of Candidature	Type A
PH Type	Not Applicable	Date of Birth	12/05/1992
Annual Family Income (₹)	1,00,000 - 1,50,000		

Qualification Details

Examination	Marks Obtained	Out of	Percentage
B.Pharmacy	Appearing	Appearing	Appearing

Merit Details :

State Level General Merit No.	1594	Category Merit No.	
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Allotment Details

Choice Code	518582210
Course	Pharmaceutical Chemistry
Institute	Pravara Rural Education Society's Pravara Rural College of Pharmacy, Pravaranagar
Seat Type	NH

NOTE: The candidate has paid Rs.5000/- In CASH As a partial payment.
Declaration by Candidate

I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the Institute/college will have rights to expel, rusticate me from the Institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

Reporting to the Institute as per allotment : 23-06-2015 To 03-07-2015

Date: 24/06/2015
Place: Aurangabad

Signature of The Candidate
(SURADKAR ASHWIN SANJAY)

Allotted On: 24-06-2015 15:42:05
Allotted By: adminnawale
Printed On: 24-06-2015 15:42:11
Printed By: adminnawale

OFFICE USE ONLY

Seal of adminnawale **Signature of Authorised Officer (adminnawale)**
Last Modified By: MPH15102776 **Last Modified on:** 07-05-2015 12:24:5

Joint Director (Admin.)
Technical Education (R.O.)
Aurangabad.

Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p. Loni-413736



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

ZENDE TEJAL PRAFULLA

No. 0729

Bharati Vidyapeeth Deemed University, Pune
Bharati Vidyapeeth Bhavan, L.B.S. Road, Pune - 411 030 (INDIA)
(Established u/s. 3 of the UGC Act 1956)
GRADE CARD

SEAT NO.: 1514680027 PER. REG. NO.: 1500008047

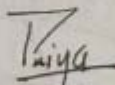
NAME : *ZENDE TEJAL PRAFULLA

COLLEGE : POONA COLLEGE OF PHARMACY, PUNE

MASTER OF PHARMACY (M. PHARM.) (C.B.C.S.)(PHARMACOLOGY): WINTER-2015

M. Pharm. Sem-I

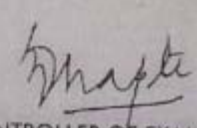
Sr. No.	Subject Name	CREDIT VALUE	UE	IA	SEMI	GP
1	ADVANCED PHARMACEUTICAL ANALYSIS	4	B+	A+	-	8
2	ADVANCED PHARMACOLOGY - I	4	A	A+	-	8
3	RESEARCH METHODOLOGY & BIOSCREENING	4	A	A+	-	8
4	PHARMACEUTICAL ADMINISTRATION	4	A	A	-	8
5	ADVANCED PHARMACEUTICAL ANALYSIS (PRACTICAL)	3	A	A+	-	9
6	ADVANCED PHARMACOLOGY - I (PRACTICAL)	3	A	A	-	8
7	SEMINAR-I	3	-	-	A+	9
SGPA						8.24


Principal
Pravara Rural College of Pharmacy
Pravaranagar, A.P. Loni-431007

RESULT : --

DATE : 12/02/2016




CONTROLLER OF EXAMINATION:



PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI

TAMBE SNEHAL KAILAS

NO. 17 - 0074878

SAVITRIBAI PHULE PUNE UNIVERSITY
Savitribai Phule Pune University
GATEWAY CAMPUS, PUNE 411 005

STATEMENT OF MARKS FOR: **NAME OF THE CANDIDATE: TAMBE SNEHAL KAILAS** (Roll No. 17-0074878)

DATE: 10/05/2022
COURSE: B. Pharm
SEMESTER: 1st
SUBJECT: **Pharmaceutical Chemistry-I**

Sl. No.	Question	Answer	Mark
1	1. Write the structure of Aspirin.		05
2	2. Write the structure of Paracetamol.		05
3	3. Write the structure of Ibuprofen.		05
4	4. Write the structure of Naproxen.		05
5	5. Write the structure of Celecoxib.		05
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99	99. Write the structure of Celecoxib.		05
100	100. Write the structure of Celecoxib.		05

Signature of Director:

Principal of Instruction, English

Principal
Pravara Rural College of Pharmacy
Pravara Nagar, Loni-413 736