



Jagannath University  
Faculty of Life and Earth Sciences  
**Master of Pharmacy (Professional) Program**  
**Department of Pharmacy**

Attach photograph  
30 mm X 40 mm

**Admission Test Fall 2022**  
**Fall 2022 (August-January)**

**Application Form**  
**Batch 02P**

**Choice of major:**   
**(Put number 1 and/or 2 according to your choice)**

**Industrial Pharmacy**  
**Pharmaceutical Marketing**

(To be filled by the office)

Roll: 02P-

- Name of Applicant: .....
- Father's Name: .....
- Mother's Name: .....
- National ID No.: ..... 5. Date of Birth: .....
- Present Address: .....
- Permanent Address: .....
- Mobile Number: ..... 9. E-mail address: .....
- Academic records:

Degree	Name of the Institution	Exam year	Subject	cGPA/Division

11. Current Status:  Student  Employee  Self-Employed  Others

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_ **Signature of the Convener**  
M. Pharm. (Professional) Program Admission Committee



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