

PYDAH COLLEGE OF PHARMACY

(Approved by PCI, AICTE and Affiliated to Andhra University, Visakhapatnam)

Yanam Road, PATAVALA, KAKINADA-533461, E.G.Dt

Telephone: 0884-2315344/45

Email id: princpharma@pydah.edu.in

website: www.pydahpharmacy.edu.in



PYDAH COLLEGE OF PHARMACY UCHCH ADHYAYANA SCHEME

MOTIVE:

Pydah College Of Pharmacy provides a range of pharmacy programs. The primary aim of this policy is to disclose the fee structure and scholarship opportunities accessible to students across the post graduation programme.

SCOPE:

The purpose of this document is to establish and formalize the scholarship waiver policy under the "PYDAH COLLEGE OF PHARMACY UCHCH ADHYAYANA SCHEME" for cohorts commencing their studies in 2020 and beyond, encompassing M.Pharmacy programme provided by Pydah College Of Pharmacy. It is important to note that this policy does not delineate the admission criteria; such criteria are distinct and are communicated through separate admission notifications for each academic year.

POLICY STATEMENT:

In this program, a fee reduction of 10,000/- is extended to students as an incentive to M.Pharmacy programme. The objective of this policy is to alleviate students' financial burden by offering them a discount equivalent to the specified amount on their fees.


PROCEDURE:

Among the enrolled students, a fee waiver is provided to those who do not receive any scholarships either from governmental or non-governmental organizations.

STUDENT ETIQUETTE:

The tuition fee exemption applies to the entire duration of the two-year M.Pharmacy program offered by the college. This benefit is contingent upon the students maintaining good behaviour, as well as consistently upholding satisfactory attendance records and achieving commendable grades.

A student who is benefiting from the scholarship waiver fail to adhere to the established code of conduct, they will lose their eligibility for the scholarship waiver for the current semester and any subsequent semesters. Instances of such misconduct will be promptly reported to the college's head authority by the faculty accompanied by concrete evidence. A comprehensive inquiry will be conducted before any final decisions are reached.


PRINCIPAL
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Application for UCHCH ADHYAYANA

Name of the Student :

Father name:.....

Occupation:.....

Mother name:.....

Occupation:.....

Annual income of family:.....

Year of study:.....

Register Number:.....

Percentage of marks obtained in B.Pharmacy.....

Whether provided with JVD or any other scholarships: Yes/No

I acknowledge that the given information is true. I kindly appeal to you to review my application for a scholarship. I want to emphasize that I am not benefiting from any form of financial assistance for my education either from governmental or non-governmental organizations.

Student's signature

Parent's signature

For office use only: The student meets all the necessary criteria to be granted a scholarship and as a result, the fee reduction has been approved for the candidate.