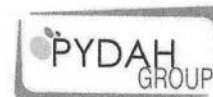


# PYDAH COLLEGE OF PHARMACY

(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



Education & Beyond

AY:2022-23

## LIST OF STUDENTS BENEFITED BY UCCH ADHYAYANA

S.NO	STUDENT NAME
1	GUTTULA LEELA MADHURI
2	KADIMI DEVI SRAVANI
3	MADDIMSETTY YESU SURYA PRAKASH
4	NAKKA SRUTHI
5	POSINA RAKSHITHA
6	THONANGI KEERTHI
7	VIPPARTHI NITYA RANI
8	GUBBALA HARITHA
9	KALIBOYINA RAMPRASAD
10	KOMMANA SWATHI
11	KONALA THANUSHA ROY
12	MEDABALLI RUPA SRI
13	MERLA SUDHA
14	RAYI SAHAJA
15	TADALA VENKATA KAIVALYA
16	BOKKA SRUTHI
17	EDARAPALLI SAI GAYATRI
18	GEDDAM DIVYA
19	KOPPADI JAYA RAVI CHANDARA GOWTHAM
20	MATTAPARTHI JASWANTH SIVA
21	MATTAPARTHI SHIVA KRISHNA
22	MAVURI RAMYASRI BRAMARAMBA
23	SANABOYINA DEVI LOVA LAVANYA
24	YALLAMILLI BHARATHI
25	YELLAMILLI VEERA VENKATA KIRAN
26	CHERUKURI VAISHNAVI
27	DUNABOINA ANUSHA
28	GUMMADI HEMA SRI
29	KETINI BHAGYASRI
30	NANDAM UMA MAHESWARA SUBBARAO
31	NIMUSHAKAVI KUSULU
32	NURUKURTHI SUSHMITHA SHAINNEY
33	REKADI VINAY KUMAR
34	SAI VINAY BALLA

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35	SAKA ABISHEKNATH
36	UNDRU PURNIMA
37	BADAMPUDI SAM BENJAMIN
38	GALI VEERA VENKATA SATYA SURYA PRAKASA RAO
39	RAYUDU HARI KRISHNA
40	RELANGI LOKESH SIVA SURYA GOWD
41	SADANALA PAVANI SATYA
42	SAMANA PAVANKUMAR
43	SAMANTHAKURTHI P S J PRANAV
44	SHEIK SUFIYA
45	SIDDANTHAPU CHILAKAMMA
46	VASAMSETTI HIMDUJA
47	YAKKALA REVANTH SUBRAMANYAM SAI
48	BADUDU SANDHYA
49	CHINTHALURI SATYA PRASANTH RAJU
50	INUMARTHY MEENAKSHI
51	JALLI SUJITHA
52	K PAVANI
53	KILARI DIVYA REKHA
54	KOLLU NAVEEN KUMAR
55	KUCHARLAPATI MADHU HASITHA DEVI
56	PENUMALA VINAY KUMAR
57	SANABOINA DURGA SOWJANYA
58	SENAPATHI KHYATHI LEKHA
59	THALLAPUDI YASWANTH RAVI TEJA

CASHIER

  
PRINCIPAL



SECRETARY



# PYDAH EDUCATIONAL INSTITUTIONS

## KAKINADA

**APPLICATION FOR ADMISSION**  
(PLEASE FILL THE FORM IN CAPITAL LETTERS)

1. Name of the Student : Yellamilli Veera Venkata Kiran  
(As per S.S.C.)



Aadhar No : 3618 1347 5451 Mobile : 7989527234

2. Gender :  Male  Female

3. Father's Name : Y. Venkata Ram Babu

Mobile : ..... Occupation : .....

Nationality : Indian Religion : Hindu

Mother's Name : Y. Anantha Lakshmi Mobile : 6281359733

Aadhar No : .....

4. Date of Birth :

(As Per 10<sup>th</sup> Marks Memo) Date Month Year

5. Reservation Category :  SC  ST  EBC  OC  
 BC-A  BC-B  BC-C  BC-D  BC-E  OTHER

Other Reservation :  NCC  SPORTS  EX-SERVICEMAN-SERVICE

PH  OTHER(IF ANY)

For Office Use

Course : M.Pharm

Branch : PQA

Quota :

6. Address for communication (In Capital Letters)

Door No/ Street Name Sangam Colony-2

Land Mark..... Village/City/Town Mandapeta

Mandal..... District..... Pin Code : 533308

7. Address of Any Two Close Relatives/ Friends :

1)..... 2).....

Mobile : ..... Mobile : .....

8. Details of Qualified Examination :  SSC  Inter Stream  Degree/ B.Tech  Others

Medium of Qualified Examination :  English  Telugu  Other Medium

9. Details of the School/ College Last Studied :

Standard	Academic Year	Name of the School/ College & Address	Hall Ticket No.	Total Marks / Grade	Max. Marks	%
10th/ Inter/ Diploma/ B.Tech/ B.Pharm/						

Name

Standard

Institution

10. Details of Brothers : 1) .....

Sisters : 2) .....

Referred By : ..... Ph.No. : .....

**CHECKLIST**

S.N.	PARTICULARS	YES / NO	S.N.	PARTICULARS	YES / NO
1	SSC	✓	8	EAPCET RANKCARD	
2	INTER	✓	9	EAPCET HALL TICKET	
3	TC	✓	10	ICR FORM	
4	STUDY	✓	11	ALLOTMENT / JOINING REPORT	
5	CASTE		12	AADHAR CARD	✓
6	INCOME	✓	13	RATION CARD	
7	PHOTOS (5)		14	BANK PASS BOOK	

**NOTE : 2 SETS OF XEROX COPIES**

**FOR OFFICE USE**

**DECLARATION**

I will follow the discipline of the institution and strictly adopt anti – ragging policies. In the event of my misbehaviour, I will not question of action whatsoever taken by the authorities of the institution, as a part of the discipline, including my expulsion, I hereby declare the particulars mentioned above are true and CORRECT to the best of my knowledge. I also declare that I have understood the rules and regulations and fee structure of the college of govt/ University academic regulations 75 % attendance and marks/ Credits etc..., I Promise to state that I will Obey the above and I am here with submitting all my original certificates for submission into your institution.

*X.V.V. Kiran*  
Signature of the Student

*Y. Venk*  
Signature of the Parent

**Undertaking by the Parent :**

- I will abide by the rules and regulations laid in the prospectus . I will submit all the originals along with the photocopies of the certificates and passport size photos at the time of joining my ward in the institution.
- I know that the fee paid towards admission is not Refundable in any case. Cancellation of admission or settlement of account is as per the conditions mentioned by the management.
- If my ward/ visitor, Misbehaves or create any disturbance in the campus, the concerned ward can be terminated from the institution.
- Fee paid for my ward will not be transferred to another student in any case.
- If I want to shift my ward from your Intitution to other before completion of course, I shall pay all the remaining Fee of full course as mentioned .
- Fee Structure and Concession, If Any, Decided on merit, case to case and fixed by management is final.
- If My ward fails to maintain 75% attendance, he/she will not be permitted to write the exams.
- Just filling the application is not confirmation of the admission until it's ratified by the university.
- After I have got satisfied myself with all the facilities , conditions, rules and regulations of the institutions and the hostel, I am willingly admitting my ward.

Date : .....  
*Rs 25000 / Semesters*

*X.V.V. Kiran*  
Signature of the Student

*Y. Venk*  
Signature of the Parent

PRINCIPAL  
**Pydah College of Pharmaco**  
PATAVALA, KAKINADA

**FOR OFFICE USE**

<b>CONFIRMATION</b>			
AMOUNT PAID		RECEIPT NO	
DATE		Authority Signature	



# PYDAH EDUCATIONAL INSTITUTIONS

## KAKINADA

**APPLICATION FOR ADMISSION**  
(PLEASE FILL THE FORM IN CAPITAL LETTERS)

1. Name of the Student : GUMMADI HEMA SRI

(As per S.S.C.)

Aadhar No : ..... Mobile : 8008058799

2. Gender :  Male  Female

3. Father's Name : GUMMADI NARASIMHA MURTHY

Mobile : 9866739527 Occupation : .....

Nationality : Indian Religion : Hindu

Mother's Name : GUMMADI KUMARI Mobile : .....

Aadhar No : .....

4. Date of Birth : 05 04 1998

(As Per 10<sup>th</sup> Marks Memo) Date Month Year

5. Reservation Category :  SC  ST  EBC  OC

BC-A  BC-B  BC-C  BC-D  BC-E  OTHER

Other Reservation :  NCC  SPORTS  EX-SERVICEMAN-SERVICE

PH  OTHER(IF ANY)

For Office Use

Course : M.Pharm

Branch : P.CEUTICS

Quota : MQ

6. Address for communication (In Capital Letters)

Door No/ Street Name 2-24/1, KOMMARI STREET

Land Mark Near Maharashtra Bank Village/City/Town Sarpavaram

Mandal Kakinada District East Godavari Pin Code : 533005

7. Address of Any Two Close Relatives/ Friends :

1)..... 2).....

Mobile : ..... Mobile : .....

8. Details of Qualified Examination :  SSC  Inter Stream  Degree/ B.Tech  Others

Medium of Qualified Examination :  English  Telugu  Other Medium

9. Details of the School/ College Last Studied :

Standard	Academic Year	Name of the School/ College & Address	Hall Ticket No.	Total Marks / Grade	Max. Marks	%
10th/ Inter/ Diploma/ B.Tech/ B.Pharm/						

Name

Standard

Institution

10. Details of Brothers : 1) .....

Sisters : 2) .....

Referred By : ..... Ph.No. : .....

**CHECKLIST**

S.N.	PARTICULARS	YES / NO	S.N.	PARTICULARS	YES / NO
1	SSC	✓	8	EAPCET RANKCARD	
2	INTER	✓	9	EAPCET HALL TICKET	
3	TC	✓	10	ICR FORM	
4	STUDY	✓	11	ALLOTMENT / JOINING REPORT	
5	CASTE		12	AADHAR CARD	✓
6	INCOME	✓	13	RATION CARD	
7	PHOTOS (5)		14	BANK PASS BOOK	

**NOTE : 2 SETS OF XEROX COPIES**

**FOR OFFICE USE**

**DECLARATION**

I will follow the discipline of the institution and strictly adopt anti – ragging policies. In the event of my misbehaviour, I will not question of action whatsoever taken by the authorities of the institution, as a part of the discipline, including my expulsion, I hereby declare the particulars mentioned above are true and CORRECT to the best of my knowledge. I also declare that I have understood the rules and regulations and fee structure of the college of govt/ University academic regulations 75 % attendance and marks/ Credits etc....., I Promise to state that I will Obey the above and I am here with submitting all my original certificates for submission into your institution.

*[Signature]*  
Signature of the Student

*[Signature]*  
Signature of the Parent

**Undertaking by the Parent :**

- I will abide by the rules and regulations laid in the prospectus . I will submit all the originals along with the photocopies of the certificates and passport size photos at the time of joining my ward in the institution.
- I know that the fee paid towards admission is not Refundable in any case. Cancellation of admission or settlement of account is as per the conditions mentioned by the management.
- If my ward/ visitor, Misbehaves or create any disturbance in the campus, the concemed ward can be terminated from the institution.
- Fee paid for my ward will not be transferred to another student in any case.
- If I want to shift my ward from your Intitution to other before completion of course, I shall pay all the remaining Fee of full course as mentioned .
- Fee Structure and Concession, If Any, Decided on merit, case to case and fixed by management is final.
- If My ward fails to maintain 75% attendance, he/she will not be permitted to write the exams.
- Just filling the application is not confirmation of the admission unti it's ratified by the university.
- After I have got satisfied myself with all the facilities , conditions, rules and regulations of the institutions and the hostel, I am willingly admitting my ward.

Date : .....  
*[Signature]*

*[Signature]*  
Signature of the Student

*[Signature]*  
Signature of the Parent

**FOR OFFICE USE**

<b>CONFIRMATION</b>			
AMOUNT PAID	25000/-	RECEIPT NO	1232
DATE		Authority Signature	

# PYDAH COLLEGE OF PHARMACY

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

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Email id: princpharma@pydah.edu.in

website: www.pydahpharmacy.edu.in

PYDAH  
GROUP

Education & Beyond

## Application for UCHCH ADHYAYANA

Name of the Student : ..Guttula Leela Maduri.....

Father name: ..G. Veera Raju.....

Occupation:.....

Mother name: ..G. Tulasi Lakshmi.....

Occupation:.....

Annual income of family:.....

Year of study: ..2022.....

Register Number: ..20229016.....

Percentage of marks obtained in B.Pharmacy: ..73%.....

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

G.L Maduri

Student's signature

G.V Raju

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.



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Pydah College of Pharmacy  
PATAVALA, KAKINADA

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website: www.pydahpharmacy.edu.in

PYDAH  
GROUP

Education & Beyond

## Application for UCHCH ADHYAYANA

Name of the Student : ..Kadimi...Devi...Sravani.....

Father name: K...Veera...Venkata...Ramana.....

Occupation: .....

Mother name: K: Satya veni.....

Occupation: .....

Annual income of family: .....

Year of study: 2022.....

Register Number: 20229015.....

Percentage of marks obtained in B.Pharmacy: 74%.....

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.


K. Devi Sravani

Student's signature

K.V.V Ramana

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.

  
PRINCIPAL  
Pydah College of Pharmacy  
PATAVALA, KAKINADA



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website: www.pydahpharmacy.edu.in

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Education & Beyond

## Application for UCHCH ADHYAYANA

Name of the Student : MADDIMSETTY YESU SURYA PRAKASH.....

Father name: M. RAM BABU.....

Occupation:.....

Mother name: M. VARA LAKSHMI.....

Occupation:.....

Annual income of family:.....

Year of study: 2022.....

Register Number: 20229014.....

Percentage of marks obtained in B.Pharmacy: 71%.....

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.

M. VS Prakash

Student's signature

M. Rambabu

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.

  
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Education & Beyond

## Application for UCHCH ADHYAYANA

Name of the Student : ... NAKKA SRUTHI .....

Father name: ... N. VENKATA RAMANA .....

Occupation: .....

Mother name: ... N. MANGA DEVI .....

Occupation: .....

Annual income of family: .....

Year of study: ... 2022 .....

Register Number: ... 20229013 .....

Percentage of marks obtained in B.Pharmacy ... 69% .....

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

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.

N. Sruthi

Student's signature

N. Venkatarama

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.

[Signature]

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Education & Beyond

## Application for UCHCH ADHYAYANA

Name of the Student : ..POSINA RAKSHITHA.....

Father name:..P. Ramanna Dora.....

Occupation:.....

Mother name: P. Naga parvathi.....

Occupation:.....

Annual income of family:.....

Year of study: 2022.....

Register Number: 20229012.....

Percentage of marks obtained in B.Pharmacy..... 68%.....

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.

P. Rakshitha  
Student's signature

P. Ramanna Dora  
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.

[Signature]

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Education & Beyond

## Application for UCHCH ADHYAYANA

Name of the Student : THONAGI KEERTHI

Father name: T. VEERA VENKATA SATYA MOHAN RAO

Occupation: .....

Mother name: T. PREMA KUMARI

Occupation: .....

Annual income of family: .....

Year of study: 2022

Register Number: 20229011

Percentage of marks obtained in B.Pharmacy: 72%

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.

T. Keerthi  
Student's signature

T.V.V.S.  
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.

[Signature]  
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Education & Beyond

## Application for UCHCH ADHYAYANA

Name of the Student : *Vinayathi Nitya Rani*

Father name: *V. Srikanth*

Occupation: .....

Mother name: *V. Padmavathi*

Occupation: .....

Annual income of family: .....

Year of study: *2022*

Register Number: *2022 9010*

Percentage of marks obtained in B.Pharmacy: *74%*

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.

*V. Rani*

Student's signature

*V. Srikanth*

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.

*[Signature]*

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PYDAH  
GROUP

Education & Beyond

## Application for UCHCH ADHYAYANA

Name of the Student : ..GUBBALA HARITHA.....

Father name:..G. Veera Bhadra Rao.....

Occupation:.....

Mother name:..G. Sunya Devi.....

Occupation:.....

Annual income of family:.....

Year of study:....2022.....

Register Number:..20229024.....

Percentage of marks obtained in B.Pharmacy.....72%.....

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.

G. Haritha

Student's signature

G.VB Rao

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.



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Education & Beyond

## Application for UCHCH ADHYAYANA

Name of the Student : Kaliboyina Ram Prasad

Father name: K. Srinu

Occupation: .....

Mother name: K. Appalakonda

Occupation: .....

Annual income of family: .....

Year of study: 2022

Register Number: 20229023

Percentage of marks obtained in B.Pharmacy: 72%


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.

K. Ram Prasad  
Student's signature

K. Srinu  
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.

  
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website: www.pydahpharmacy.edu.in

PYDAH  
GROUP

Education & Beyond

## Application for UCHCH ADHYAYANA

Name of the Student : ... Kommana Swathi .....

Father name: ... K. Ganesh .....

Occupation: .....

Mother name: ... K. Lakshmi .....

Occupation: .....

Annual income of family: .....

Year of study: ... 2022 .....

Register Number: ... 20229022 .....

Percentage of marks obtained in B.Pharmacy ... 72% .....

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.

K. Swathi

Student's signature

K. Ganesh

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.

[Signature]

PRINCIPAL  
Pydah College of Pharmacy  
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website: www.pydahpharmacy.edu.in

PYDAH  
GROUP

Education & Beyond

## Application for UCHCH ADHYAYANA

Name of the Student : Konala Thanusha Roy

Father name: K. Rama Rao

Occupation: .....

Mother name: K. Bangaram

Occupation: .....

Annual income of family: .....

Year of study: 2022

Register Number: 20229021

Percentage of marks obtained in B.Pharmacy: 7.3%

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.



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

Telephone: 0884-2315344/45

Email id: princpharma@pydah.edu.in

website: www.pydahpharmacy.edu.in

PYDAH  
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Education & Beyond

## Application for UCHCH ADHYAYANA

Name of the Student : MEDABALLI RUPA SRI.....

Father name: M. BALAJI.....

Occupation:.....

Mother name: M. Naga Lakshmi Kumari.....

Occupation:.....

Annual income of family:.....

Year of study: 2022.....

Register Number: 2022 9020.....

Percentage of marks obtained in B.Pharmacy: 73%.....

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.

M. Sri  
Student's signature

M. Balaji  
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.

S. Sridhar  
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Education & Beyond

## Application for UCHCH ADHYAYANA

Name of the Student : ...Meela Sudha.....

Father name: ..M. Srinu.....

Occupation:.....

Mother name: ..M. Naga Mani.....

Occupation:.....

Annual income of family:.....

Year of study: ..2022.....

Register Number: ..20229019.....

Percentage of marks obtained in B.Pharmacy..... 75%.....

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.

Sudha H.  
Student's signature

Srinu. M.  
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.

[Signature]

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website: www.pydahpharmacy.edu.in

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Education & Beyond

## Application for UCHCH ADHYAYANA

Name of the Student : *Raji Sahaja*.....

Father name: *R. Satya narayana*.....

Occupation:.....

Mother name: *R. Triveni*.....

Occupation:.....

Annual income of family:.....

Year of study: *2022*.....

Register Number: *20229018*.....

Percentage of marks obtained in B.Pharmacy: *76%*.....

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.

*R. Sahaja*  
Student's signature

*R. Satyanarayana*  
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.

*[Signature]*  
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website: www.pydahpharmacy.edu.in



Education & Beyond

## Application for UCHCH ADHYAYANA

Name of the Student : Tadala Venkata kaivalya.....

Father name: T. Rama Krishna Durga Sankar.....

Occupation:.....

Mother name: T. Satya Surya vathi.....

Occupation:.....

Annual income of family:.....

Year of study: 2022.....

Register Number: 20229017.....

Percentage of marks obtained in B.Pharmacy: 72%.....

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.

T.V. kaivalya  
Student's signature

T.R.K.D.Sankar  
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.

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website: www.pydahpharmacy.edu.in

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Education & Beyond

## Application for UCHCH ADHYAYANA

Name of the Student : ..BOKKA SRUTHI.....

Father name: ..B. SRINU.....

Occupation:.....

Mother name: ..B. SUJATA.....

Occupation:.....

Annual income of family:.....

Year of study: ..2022.....

Register Number: ..20229009.....

Percentage of marks obtained in B.Pharmacy ..73%.....

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

B. Sruthi

Student's signature

B. Srinu

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.

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## Application for UCHCH ADHYAYANA

Name of the Student : EDARAPALLI SAI GAYATHRI

Father name: E. LAKSHMI PATHI RAJU

Occupation:

Mother name: E. ARUNA KUMARI

Occupation:

Annual income of family:

Year of study: 2022

Register Number: 20229008

Percentage of marks obtained in B.Pharmacy: 77%

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.

E. Sai Gayathri  
Student's signature

E. Raju  
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.

  
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## Application for UCHCH ADHYAYANA

Name of the Student : Greddam Divya

Father name: Gr. vijay kumar

Occupation: .....

Mother name: Gr. Prabhavathi

Occupation: .....

Annual income of family: .....

Year of study: 2022

Register Number: 20229007

Percentage of marks obtained in B.Pharmacy: 81%

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.

Gr. Divya  
Student's signature

Gr. vijaya kumar  
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.

Gr. Divya  
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## Application for UCHCH ADHYAYANA

Name of the Student : KOPPADI JAYA RAVI CHANDRA GOWTHAM

Father name: K. KRISHNA KISHORE

Occupation: .....

Mother name: K. LAKSHMI

Occupation: .....

Annual income of family: .....

Year of study: 2022

Register Number: 20229006

Percentage of marks obtained in B.Pharmacy: 71%

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.

K. J. R. Ch. Gowtham

Student's signature

K. K. K.

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.

*[Handwritten Signature]*

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Education & Beyond

## Application for UCHCH ADHYAYANA

Name of the Student : Matta parthi.. Jarwanth.. Siva.....

Father name: M. Veera Sita Rama Rao.....

Occupation:.....

Mother name: M. Venkata Rama Lakshmi.....

Occupation:.....

Annual income of family:.....

Year of study: 2022.....

Register Number: 20229025.....

Percentage of marks obtained in B.Pharmacy: 74%.....

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.

M. Jarwanth

Student's signature

M. Sita Rama Rao

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.

[Signature]

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## Application for UCHCH ADHYAYANA

Name of the Student : Matta Parthi Siva Krishna.....

Father name: M. Satya narayana.....

Occupation:.....

Mother name: M. Sri devi.....

Occupation:.....

Annual income of family:.....

Year of study: 2022.....

Register Number: 20229005.....

Percentage of marks obtained in B.Pharmacy: 81%.....

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.

M. Siva  
Student's signature

Satya M  
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.

[Signature]  
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Education & Beyond

## Application for UCHCH ADHYAYANA

Name of the Student : Mavuri Ramya Sri Bramaramba

Father name: M. Naga Narasimha Rao

Occupation: .....

Mother name: M. Annapurna Visalakshi

Occupation: .....

Annual income of family: .....

Year of study: 2022

Register Number: 20229004

Percentage of marks obtained in B.Pharmacy: 73%

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.

M. R. S. Bramaramba

Student's signature

M. Naga Narasimha Rao

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.

S. S. S.

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Education & Beyond

## Application for UCHCH ADHYAYANA

Name of the Student : SANABOYINA DEVI LOVA LAVANYA

Father name: S. VENKATESWARA ROA

Occupation: .....

Mother name: S. PALLAVI

Occupation: .....

Annual income of family: .....

Year of study: 2022

Register Number: 20229603

Percentage of marks obtained in B.Pharmacy: 73%


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.

S. Devi Lova Lavanya  
Student's signature

S. Venkateswara Roa  
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.

  
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Education & Beyond

## Application for UCHCH ADHYAYANA

Name of the Student : Yallamilli Bharathi

Father name: Y. Rama Mohana Rao

Occupation: .....

Mother name: Y. Naga Mami

Occupation: .....

Annual income of family: .....

Year of study: 2022

Register Number: 20229002

Percentage of marks obtained in B.Pharmacy: 71%

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.

Y. Bharathi  
Student's signature

Y. Rama Rao  
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.

[Signature]  
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## Application for UCHCH ADHYAYANA

Name of the Student : YELLAMILLI VEERA VENKATA KIRAN

Father name: Y. VENKATA RAM BABU

Occupation: .....

Mother name: Y. ANANTHA LAKSHMI

Occupation: .....

Annual income of family: .....

Year of study: 2022

Register Number: 20229001

Percentage of marks obtained in B.Pharmacy: 68%

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.

Y. V. V. Kiran  
Student's signature

Y. Venk  
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.

[Signature]

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website: www.pydahpharmacy.edu.in

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## Application for UCHCH ADHYAYANA

Name of the Student : CHERUKURI VAISHNAVI

Father name: CHERUKURI AMMAJI RAO

Occupation: .....

Mother name: CH. VARALAKSHMI

Occupation: .....

Annual income of family: .....

Year of study: 2021

Register Number: 20214021

Percentage of marks obtained in B.Pharmacy: 74%

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.

ch. vaishnavi

Student's signature

ch. Ammaji

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.

[Signature]  
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## Application for UCHCH ADHYAYANA

Name of the Student : Dunaboina Anusha

Father name: Dunaboina Srinivas Rao

Occupation: farmer

Mother name: D. Manga Devi

Occupation: .....

Annual income of family: .....

Year of study: 2021

Register Number: 20219039

Percentage of marks obtained in B.Pharmacy: 72%

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

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.

D. Anusha  
Student's signature

D. S. Rao  
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.

[Signature]  
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Education & Beyond

## Application for UCHCH ADHYAYANA

Name of the Student : Gummadi hemasri

Father name: Gummadi vasasimha murthy

Occupation: .....

Mother name: Gummadi kumari

Occupation: .....

Annual income of family: .....

Year of study: 2021

Register Number: 20219029

Percentage of marks obtained in B.Pharmacy: 74%

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.

G. hemasri  
Student's signature

G.N. murthy.  
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.

*[Handwritten signature]*

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## Application for UCHCH ADHYAYANA

Name of the Student : ... Kebini Bhagya Sree .....

Father name: ... Kebini Pullamsetty .....

Occupation: ... Business .....

Mother name: ... K. Sabya Gouri .....

Occupation: ... house wife .....

Annual income of family: .....

Year of study: ... 2021 .....

Register Number: ... 2021 9010 .....

Percentage of marks obtained in B.Pharmacy ... 73% .....

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.

K. B Sree  
Student's signature

K. Pullamsetty  
Parent's signature

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[Signature]  
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## Application for UCHCH ADHYAYANA

Name of the Student : Nandam uma maheskhra subbarao.....

Father name: Nandam satya trimurithulu..

Occupation:.....

Mother name: M.Sarada Devi.....

Occupation:.....

Annual income of family:.....

Year of study: 2021.....

Register Number: 20219024.....

Percentage of marks obtained in B.Pharmacy: 81%.....

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.

N.U.M. subbarao  
Student's signature

M.S. trimurithulu  
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.

[Signature]

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## Application for UCHCH ADHYAYANA

Name of the Student : N. Nirmushakavi KUSULA.....

Father name: N. Raju.....

Occupation: farmer.....

Mother name: N. Lavanya.....

Occupation:.....

Annual income of family:.....

Year of study: 2021.....

Register Number: 20219027.....

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.

N. Kusula  
Student's signature

N. Raju  
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.

  
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Education & Beyond

## Application for UCHCH ADHYAYANA

Name of the Student : ..NURUKURHI..SUSHMITHA..SHAINAY.....

Father name:..NURUKURHI..CHINNA RAO.....

Occupation:....POLICE.....

Mother name:..NURUKURHI..JYOTHIKUMAR.....

Occupation:.....

Annual income of family:.....

Year of study:..2021.....

Register Number:..20219025.....

Percentage of marks obtained in B.Pharmacy.....73%.....

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.

N.S. Shainay  
Student's signature

N.C. Rao  
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.



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website: www.pydahpharmacy.edu.in

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Education & Beyond

## Application for UCHCH ADHYAYANA

Name of the Student : ... Rekadi Vinay Kumar .....

Father name: ... Rekadi Johnson .....

Occupation: ... Painter .....

Mother name: ... R.V. Kumari .....

Occupation: ... house wife .....

Annual income of family: .....

Year of study: ... 2021 .....

Register Number: ... 20219018 .....

Percentage of marks obtained in B.Pharmacy ... 68% .....

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.

R. Vinay Kumar

Student's signature

R. Johnson

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.

[Signature]

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Education & Beyond

## Application for UCHCH ADHYAYANA

Name of the Student : Sai Vinay Balla

Father name: Subbarao Balla

Occupation: Private Employ

Mother name: Balla satya veni

Occupation:

Annual income of family:

Year of study: 2021

Register Number: 20219026

Percentage of marks obtained in B.Pharmacy: 74%

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.

B. Sai Vinay  
Student's signature

Sudha  
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.



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Education & Beyond

## Application for UCHCH ADHYAYANA

Name of the Student : Saka Abishhekmath

Father name: Saka Trivenugopal

Occupation: Farmer

Mother name: S. Vijaya

Occupation:

Annual income of family:

Year of study: 2021

Register Number: 20219028

Percentage of marks obtained in B.Pharmacy: 72%

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.

S. Abishhekmath  
Student's signature

S.T. Gopal  
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.

  
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Education & Beyond

## Application for UCHCH ADHYAYANA

Name of the Student : Udru Romina

Father name: U. Balaji

Occupation: Farmer

Mother name: U. Aruna Kumari

Occupation: house wife

Annual income of family: .....

Year of study: 2021

Register Number: 20219019

Percentage of marks obtained in B.Pharmacy: 69%

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

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.

U. Romina  
Student's signature

U. Balaji  
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.

[Signature]  
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Education & Beyond

## Application for UCHCH ADHYAYANA

Name of the Student: Babupudi Sam Benjamin

Father name: B. Samuel Raju

Occupation: Pastor

Mother name: Babupudi Mary

Occupation: house wife

Annual income of family: .....

Year of study: 2021

Register Number: 20219003

Percentage of marks obtained in B.Pharmacy: 72%

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

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.

B. Sam Benjamin

Student's signature

B. SR

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.

[Signature]

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Education & Beyond

## Application for UCHCH ADHYAYANA

Name of the Student : ... GALI Veera Venkata Satya Surya Prakasa Rao

Father name: ... GI. Siva Rama Krishnayya

Occupation: ... Private Employee

Mother name: ... GI. Sati Maheswari

Occupation: ... house wife

Annual income of family: .....

Year of study: ... 2021

Register Number: ... 20219001

Percentage of marks obtained in B.Pharmacy: ... 73%

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.

GI. V. V. S. S. Prakash Rao

Student's signature

GI. K.

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.

GI. K.

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Education & Beyond

## Application for UCHCH ADHYAYANA

Name of the Student : ... RAYUDU HARI KRISHNA .....

Father name: ... RAYUDU GOVINDHA RAJU .....

Occupation: ... FARMER .....

Mother name: ... RAYUDU SATYAVENI .....

Occupation: ... House wife .....

Annual income of family: .....

Year of study: ... 2021 .....

Register Number: ... 20219012 .....

Percentage of marks obtained in B.Pharmacy: ... 78% .....


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

R. Hari Krishna  
Student's signature

R.G. Raju  
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.

  
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Education & Beyond

## Application for UCHCH ADHYAYANA

Name of the Student : Relangi Lokesh siva Surya goud

Father name: Kumar Sankar goud

Occupation: Business

Mother name: R. Geetha

Occupation: .....

Annual income of family: .....

Year of study: 2021

Register Number: 20219033

Percentage of marks obtained in B.Pharmacy: 72%

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

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.

R. L.S.S. goud  
Student's signature

Kumar Sankar goud  
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.

[Signature]

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Education & Beyond

## Application for UCHCH ADHYAYANA

Name of the Student : Sadanala Ravani Sabya

Father name: Sadanala A.V.V. Sabya narayana

Occupation: office subordinate (veterinary)

Mother name: S. Sundara manikyam

Occupation: House wife

Annual income of family: .....

Year of study: 2021

Register Number: 20219015

Percentage of marks obtained in B.Pharmacy: 73%

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.

S.P. Sabya  
Student's signature

S. AnvS. narayana  
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.

S. AnvS.  
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Education & Beyond

## Application for UCHCH ADHYAYANA

Name of the Student : ... Samana Pavan kumar

Father name: ... Samana Tataji

Occupation: ... farmer

Mother name: ... S. manga lakshmi

Occupation: ... house wife

Annual income of family: .....

Year of study: ... 2021

Register Number: ... 20219006

Percentage of marks obtained in B.Pharmacy: ... 72%

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

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.

S.P. kumar  
Student's signature

S. TATAJI  
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.

  
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## Application for UCHCH ADHYAYANA

Name of the Student : ...SAMANTHAKURTHI PSJ PRANAY.....

Father name: ...SAMANTHAKURTHI VENKATESWARLU

Occupation: ...FARMER.....

Mother name: ...S. Ganga Bhavani.....

Occupation: ...house wife.....

Annual income of family:.....

Year of study: ...2021.....

Register Number: ...20219005.....

Percentage of marks obtained in B.Pharmacy ...68%.....

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.

S. PSJ Pranay  
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.



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## Application for UCHCH ADHYAYANA

Name of the Student : ..... SHEIK SUFIYA .....

Father name:..... SHEIK KARIMULLA .....

Occupation:..... COOHE .....

Mother name:..... SHEIK MAHA BOOBUNNISA .....

Occupation:..... HOUSE WIFE .....

Annual income of family:.....

Year of study:..... 2021 .....

Register Number:..... 20219009 .....

Percentage of marks obtained in B.Pharmacy..... 72% .....

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.

S. Sufiya

Student's signature

SK

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.

S. Sufiya

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## Application for UCHCH ADHYAYANA

Name of the Student : SIDDANTHAPU CHILAKAMMA

Father name: SIDDANTHAPU GEORGE (LATE)

Occupation:.....

Mother name: SIDDANTHAPU BABY

Occupation:..... House wife

Annual income of family:.....

Year of study:..... 2021

Register Number:..... 20219014

Percentage of marks obtained in B.Pharmacy..... 77%

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.

S. Chilakamma  
Student's signature

S. Baby  
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.

S. Chilakamma  
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Education & Beyond

## Application for UCHCH ADHYAYANA

Name of the Student : Vasamsetti Himduja

Father name: Vasamsetti Pydam setti

Occupation: RMP (Doctor)

Mother name: V. Kanaka duoga.

Occupation: house wife.

Annual income of family: .....

Year of study: 2021

Register Number: 20219013

Percentage of marks obtained in B.Pharmacy: 79%

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.

V. Himduja  
Student's signature

V. Pydamsetti  
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.

[Signature]  
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Education & Beyond

## Application for UCHCH ADHYAYANA

Name of the Student : Yakkala Revanbh subramanyam sai

Father name: Yakkala Srujanarayana

Occupation: Accountant

Mother name: Y. Venkateswari

Occupation: house wife

Annual income of family: .....

Year of study: 2021

Register Number: 20219011

Percentage of marks obtained in B.Pharmacy: 76%

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

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.

Y. R. S. Sai  
Student's signature

Y. Srujanarayana  
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.

[Signature]  
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Education & Beyond

## Application for UCHCH ADHYAYANA

Name of the Student : Bodugu Sandhya.....

Father name: Bodugu Srinibas Rao.....

Occupation: Farmer.....

Mother name: Bodugu Mary Kumari.....

Occupation:.....

Annual income of family:.....

Year of study: 2021.....

Register Number: 20219031.....

Percentage of marks obtained in B.Pharmacy: 74%.....

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.

B. Sandhya  
Student's signature

B. Srinivas Rao  
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.

[Signature]

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## Application for UCHCH ADHYAYANA

Name of the Student : Chinthaluri Satya Prasanth Raju.....

Father name: Chinthaluri Param Jyothi.....

Occupation: Lab Technician.....

Mother name: Ch. Geetha.....

Occupation: House wife.....

Annual income of family:.....

Year of study: 2021.....

Register Number: 20219034.....

Percentage of marks obtained in B.Pharmacy: 76%.....

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.

Ch. S. P. Raju  
Student's signature

Ch. P. J.  
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.

[Signature]

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Education & Beyond

## Application for UCHCH ADHYAYANA

Name of the Student : Inumathy Meenakshi

Father name: Inumathy Visaya Gowry Prasad

Occupation: Business

Mother name: I. Vimala Devi

Occupation: .....

Annual income of family: .....

Year of study: 2021

Register Number: 20219036

Percentage of marks obtained in B.Pharmacy: 69%

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

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.

I. Meenakshi  
Student's signature

I. V. Prasad  
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.

[Signature]

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## Application for UCHCH ADHYAYANA

Name of the Student : JALLI SUJITHA

Father name: JALLI SRINIVAS

Occupation: LABOUR

Mother name: JALLI VARA LAKSHMI

Occupation: .....

Annual income of family: .....

Year of study: 2021

Register Number: 20219008

Percentage of marks obtained in B.Pharmacy 68%

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.

J. Sujitha  
Student's signature

J. Srinivas  
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.

J. Srinivas

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## Application for UCHCH ADHYAYANA

Name of the Student : .. K. PAVANI .....

Father name: .. K. VIJAY .....

Occupation: .. Private Employee .....

Mother name: .. K. BHARATHI .....

Occupation: .. house wife .....

Annual income of family: .....

Year of study: .. 2021 .....

Register Number: .. 20219022 .....

Percentage of marks obtained in B.Pharmacy: .. 72% .....

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.

K. PAVANI  
Student's signature

K. VIJAY  
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.

  
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Pydah College of Pharmacy  
PATAVALA, KAKINADA

# 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

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Education & Beyond

## Application for UCHCH ADHYAYANA

Name of the Student : KILARI DIVYA REKHA

Father name: Kilari Rani Babu

Occupation: Dialy worker

Mother name: Kilari Aruna

Occupation: house wife

Annual income of family: .....

Year of study: 2021

Register Number: 20219004

Percentage of marks obtained in B.Pharmacy: 74%

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.

K.D. Rekha

Student's signature

K. Rani Babu

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.

K. Rani Babu

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Education & Beyond

## Application for UCHCH ADHYAYANA

Name of the Student : ... KOLLU NAVEEN KUMAR .....

Father name: ... KOLLU NARASIMHA MURTHY .....

Occupation: .....

Mother name: ... KOLLU SWAPNA .....

Occupation: ... House wife .....

Annual income of family: .....

Year of study: ... 2021 .....

Register Number: ... 2021016 .....

Percentage of marks obtained in B.Pharmacy ... 74% .....

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

K.N. kumar

Student's signature

K.N.Murthy

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.

*K. N. Murthy*

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Education & Beyond

## Application for UCHCH ADHYAYANA

Name of the Student : .. Kuchalapati madhu Hasitha Devi .....

Father name: .. Kuchalapati V.S.S. Varma .....

Occupation: .. Business .....

Mother name: .. Kuchalapati V. D. L. Sarada .....

Occupation: .. House wife .....

Annual income of family: .....

Year of study: .. 2021 .....

Register Number: .. 20219017 .....

Percentage of marks obtained in B.Pharmacy .. 77% .....

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

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.

K. M. H. Devi

Student's signature

K.V.S.S. Varma

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.

[Signature]

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## Application for UCHCH ADHYAYANA

Name of the Student : ... Penumala Vinay Kumar .....

Father name: ... Penumala Balayogi .....

Occupation: .....

Mother name: ... Penumala manga Devi .....

Occupation: ... house wife .....

Annual income of family: .....

Year of study: ... 2021 .....

Register Number: ... 20219020 .....

Percentage of marks obtained in B.Pharmacy ... 73% .....

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

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.

P. Vinay Kumar  
Student's signature

P. B. Yogi  
Parent's signature

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

[Signature]  
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## Application for UCHCH ADHYAYANA

Name of the Student : Saraboina Deoga Soudjanya

Father name: Saraboina Venkateswara Rao

Occupation: farmer

Mother name: S. Sri Mankini Devi

Occupation: house wife

Annual income of family: .....

Year of study: 2021

Register Number: 20219007

Percentage of marks obtained in B.Pharmacy: 67%

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.

S. D. Soudjanya  
Student's signature

S.V. Rao  
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.

S. D. Soudjanya

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Education & Beyond

## Application for UCHCH ADHYAYANA

Name of the Student : Senadhi Khyathi Lekha

Father name: Senadhi Bhuvaneshwar Rao

Occupation: Business

Mother name: S. Jaya Lakshmi

Occupation: .....

Annual income of family: .....

Year of study: 2021

Register Number: 20219023

Percentage of marks obtained in B.Pharmacy: 77%

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.

S. K. Lekha  
Student's signature

S. B. Rao  
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.

[Signature]

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Education & Beyond

## Application for UCHCH ADHYAYANA

Name of the Student : ...Thallapudi yaswanth Ravi Teja.....

Father name: ...Thallapudi Bhogi Raju.....

Occupation: ...Driver.....

Mother name: ...Thallapudi Anuna.....

Occupation: .....

Annual income of family: .....

Year of study: ...2021.....

Register Number: ...20219035.....

Percentage of marks obtained in B.Pharmacy: ...73%.....

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

T. Y. R. Teja.

Student's signature

T. B. Raju

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.

T. B. Raju

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