



# RATNAM INSTITUTE OF PHARMACY

(Approved by A.I.C.T.E. & P.C.I., New Delhi, Govt. of A.P., Affiliated to J.N.T. University, Anantapur.  
Recognized u/s 2(f) of the UGC Act 1956, New Delhi)  
An ISO 9001:2015 certified Institution

## NO. OF STUDENTS BENEFITTED BY RATNAM SCHOLARSHIP

Academic Year: 2022-2023

S.NO	Name of the Student	Name of the Parent	Hall Ticket No.	Course
1.	B. Vineela Sai	B. Ravi Kumar	22DM1S0101	M. Pharmacy
2.	S. Muni Sravani	S. Munindra	22DM1S0108	M. Pharmacy
3.	N. Vaishnavi	N. Srihari	22DM1S0106	M. Pharmacy
4.	P. Venkata Sushma	P. Venkateswarulu	22DM1S0109	M. Pharmacy
5.	V. Neelima	V. Venkata Subbaiah	22DM1S0314	M. Pharmacy
6.	Syed Aliya	Syed Sabhir Ahmed	22DM1T0027	Pharm D
7.	N. Pavani	N. Kamalakar	22DM1S0105	M. Pharmacy
8.	N. Praveen	N. Mohan	22DM1S0702	M. Pharmacy
9.	D. Anusha	D. Sreenivasulu	22DM1S0102	M. Pharmacy
10.	P. Nomilka Reddy	P. Sreenivasulu Reddy	22DM1S0308	M. Pharmacy
11.	T. Pavani	T. Aadishesayaih	22DM1S0312	M. Pharmacy
12.	Y. Divya	Y. Venu	22DM1S0315	M. Pharmacy
13.	Shaik Aneesha	Shaik Khaja Vali	22DM1S0310	M. Pharmacy



Principal

PRINCIPAL

RATNAM INSTITUTE OF PHARMACY

Pidathapalur, Nellore Dt. - 524 346

Pidathapalur Village & Post, MuthukurMandal, SPSR Nellore District - 524346. Andhrapradesh, India

☎ 7569180050, ✉ principal.dm@jntua.ac.in, ratnam\_pharmacy@yahoo.co.in 🌐 www.ratnampharma.edu.in

APPLICATION FOR RATNAM SCHOLARSHIP

Date: 18-08-2022

Name of the student: P. Nomika Reddy

Father's name: P. Srinivasulu Reddy

Occupation: Business

Program of Study: M. pharmacy (pharmaceuticals)

Roll Number: (22DM150308)

Annual family income: Rs. Above 3 lakhs

Government/NGO Scholarship received: Yes/No

Any other information: -

I acknowledge that the above-given information provided by me is true. I request you to consider my application for fee concession.

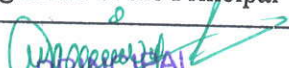
P. Nomika Reddy  
Student's Signature

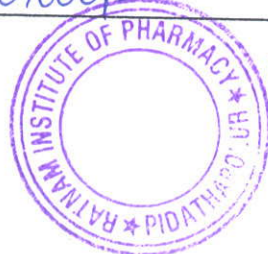
Date: 18-08-2022

For Office Use only

transportation

The Candidate is sanctioned fee concession in Academic Fee as the student fulfils the requirements to avail the fee concession.

Recommendation by the Principal	Amount	Signature of the Principal
<input checked="" type="checkbox"/> Yes/ No	10,000/-	



RATNAM INSTITUTE OF PHARMACY  
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APPLICATION FOR RATNAM SCHOLARSHIP

Date: 8/9/22

Name of the student: Y. Divya

Father's name: Y. Venu

Occupation: private employee

Program of Study: M. pharmacy (pharmaceutics)

Roll Number: Nil (22DN1SD315)

Annual family income: Rs. 8,90,000 /-

Government/NGO Scholarship received: Yes/No

Any other information: Nil

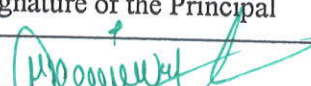
I acknowledge that the above-given information provided by me is true. I request you to consider my application for fee concession.

Y. Divya  
Student's Signature

Date: 8/9/22

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The Candidate is sanctioned fee ~~concession~~ transportation in Academic Fee as the student fulfils the requirements to avail the fee concession.

Recommendation by the Principal	Amount	Signature of the Principal
Yes/ No		



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APPLICATION FOR RATNAM SCHOLARSHIP

Date: 13-09-22

Name of the student: Nalapaneni Vaishnavi

Father's name: N. Srithari

Occupation: Tailor

Program of Study: M Pharmacy (Pharmaceutics)

Roll Number: Nil (22 DM 150306)

Annual family income: Rs. 1,80,000

Government/NGO Scholarship received: Yes/ No

Any other information: Nil

I acknowledge that the above-given information provided by me is true. I request you to consider my application for fee concession.

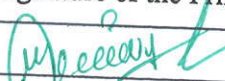
Vaishnavi

Student's Signature

Date: 13-09-22

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The Candidate is sanctioned fee concession in Academic-Fee + transportation as the student fulfils the requirements to avail the fee concession.

Recommendation by the Principal	Amount	Signature of the Principal
Yes/ No	15,000/-	



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APPLICATION FOR RATNAM SCHOLARSHIP

Date: 14-9-2022

Name of the student: B. Vineela Sai

Father's name: B. Ravi Kumar

Occupation: Business

Program of Study: M. pharmacy, Pharmacology

Roll Number: -Nil- (22PMIS 0101)

Annual family income: Rs. Below 3 lakhs

Government/NGO Scholarship received: Yes/No

Any other information: —

I acknowledge that the above-given information provided by me is true. I request you to consider my application for fee concession.

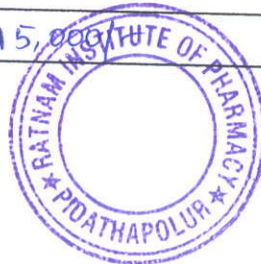
B. Vineela Sai  
Student's Signature

Date: 14-9-2022

For Office Use only

The Candidate is sanctioned fee concession in Academic Fee as the student fulfils the requirements to avail the fee concession. *transportation*

Recommendation by the Principal	Amount	Signature of the Principal
<input checked="" type="checkbox"/> Yes/ No	15,000/-	<i>[Signature]</i>



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Pidathapur Nellore Dt. 524 3415

APPLICATION FOR RATNAM SCHOLARSHIP

Date: 14-9-2022

Name of the student: Vidavalluru Neelima

Father's name: V. Venkata Subbaiah

Occupation: Farmer

Program of Study: M. Pharmacy (Pharmaceutics)

Roll Number: Nil (22DM180314)

Annual family income: Rs. 1,20,000

Government/NGO Scholarship received: Yes/No

Any other information: Nil

I acknowledge that the above-given information provided by me is true. I request you to consider my application for fee concession.

Neelima  
Student's Signature

Date: 14-9-2022

For Office Use only

The Candidate is sanctioned fee concession in <sup>transportation</sup> Academic Fee as the student fulfils the requirements to avail the fee concession.

Recommendation by the Principal	Amount	Signature of the Principal
Yes/ No	15,000/-	<u>Neelima</u>



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Pidathapur, Nellore Dt. - 524 348

## APPLICATION FOR RATNAM SCHOLARSHIP

Date: 16-09-2022

Name of the student: P. VENKATA SUSHMA

Father's name: P. VENKATESWARLU

Occupation: PRIVATE EMPLOYEE

Program of Study: M. Pharmacy [Pharmaceuticals].

Roll Number: NIL ( 22DM160309)

Annual family income: Rs. Below 3 lakhs Per Annum.

Government/NGO Scholarship received: Yes/No

Any other information: NIL


I acknowledge that the above-given information provided by me is true. I request you to consider my application for fee concession.

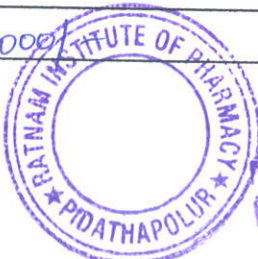
Student's Signature P. V. sushma

Date: 16-09-2022

For Office Use only

The Candidate is sanctioned fee concession in <sup>transportation</sup> Academic Fee as the student fulfils the requirements to avail the fee concession.

Recommendation by the Principal	Amount	Signature of the Principal
Yes/ No	15,000	



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APPLICATION FOR RATNAM SCHOLARSHIP

Date: 16-09-22

Name of the student: SHAIK. AMEESHA

Father's name: SHAIK. KHATAVALI

Occupation: Business

Program of Study: M- pharmacy (pharmaceutics)

Roll Number: (22 DMTSD 310)

Annual family income: Rs. 3,200,000

Government/NGO Scholarship received: Yes/No

Any other information: —

I acknowledge that the above-given information provided by me is true. I request you to consider my application for fee concession.

S. Ameesha  
Student's Signature

Date: 16-09-22

For Office Use only

transportation

The Candidate is sanctioned fee concession in Academic Fee as the student fulfils the requirements to avail the fee concession.

Recommendation by the Principal	Amount	Signature of the Principal
<input checked="" type="checkbox"/> Yes/ No	15,000 /-	<u>[Signature]</u> PRINCIPAL



RATNAM INSTITUTE OF PHARMACY  
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APPLICATION FOR RATNAM SCHOLARSHIP

Date: 01-11-2022

Name of the student: DABBUKOTU · ANUSHA

Father's name: D · SRFENIVASULU

Occupation: PRIVATE EMPLOYEE

Program of Study: M. PHARMACY (PHARMACOLOGY)

Roll Number: NILL ( 22DM180102)

Annual family income: Rs. BELOW 3 LAKHS PER ANNUM

Government/NGO Scholarship received: Yes/No

Any other information: NILL

I acknowledge that the above-given information provided by me is true. I request you to consider my application for fee concession.

Anusha.

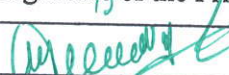
Student's Signature

Date: 01-11-2022

For Office Use only

transportation

The Candidate is sanctioned fee concession in Academic Fee as the student fulfils the requirements to avail the fee concession.

Recommendation by the Principal	Amount	Signature of the Principal
<input checked="" type="checkbox"/> Yes/ No	<u>15,000/-</u>	



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APPLICATION FOR RATNAM SCHOLARSHIP

Date: 01-11-2022

Name of the student: Nariboyina Pavani

Father's name: N. Kamalakar

Occupation: Tailor

Program of Study: Pharmacology [M. Pharmacy]

Roll Number: Nil (22 DM 180 105)

Annual family income: Rs. 2 lakhs

Government/NGO Scholarship received: Yes/No

Any other information: Nil

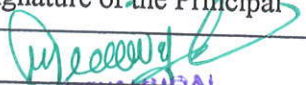
I acknowledge that the above-given information provided by me is true. I request you to consider my application for fee concession.

Student's Signature N. Pavani

Date: 01-11-2022

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The Candidate is sanctioned fee concession in transportation Academic Fee as the student fulfils the requirements to avail the fee concession.

Recommendation by the Principal	Amount	Signature of the Principal
Yes/ No	15,000/-	



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# APPLICATION FOR RATNAM SCHOLARSHIP

Date: 2/11/22

Name of the student: T. Pavani  
Father's name: T. Adhiseshaiah  
Occupation: Private Employee  
Program of Study: M. Pharm [Pharmaceutics]  
Roll Number: ( 22 DM 680 312 )  
Annual family income: Rs. 30000

Government/NGO Scholarship received: Yes/No

Any other information: \_\_\_\_\_

I acknowledge that the above-given information provided by me is true. I request you to consider my application for fee concession.

T. Pavani

Student's Signature

Date: 7/11/22

For Office Use only

The Candidate is sanctioned fee concession in transportation Academic Fee as the student fulfils the requirements to avail the fee concession.

Recommendation by the Principal	Amount	Signature of the Principal
Yes/ No	<u>15,000</u>	<u>[Signature]</u>



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APPLICATION FOR RATNAM SCHOLARSHIP

Date: 08-11-22

Name of the student: NANNAM PRAVEEN

Father's name: NANNAM Mohan

Occupation: Private employe

Program of Study: M.Pharmacy [Pharmaceutical Analysis]

Roll Number: Nil (22DM180702)

Annual family income: Rs. below 3lakhs per annum

Government/NGO Scholarship received: Yes/No

Any other information: Nil

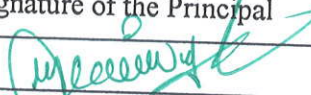
I acknowledge that the above-given information provided by me is true. I request you to consider my application for fee concession.

N. Praveen  
Student's Signature

Date: 08-11-22

For Office Use only

The Candidate is sanctioned fee concession in <sup>transportation</sup> Academic Fee as the student fulfils the requirements to avail the fee concession.

Recommendation by the Principal	Amount	Signature of the Principal
Yes/ No	15,000/-	



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APPLICATION FOR RATNAM SCHOLARSHIP

Date: 09-11-22

Name of the student: S. Muni Sravani

Father's name: S. Munindra

Occupation: Farmer

Program of Study: M. Pharmacy (pharmaceutics)

Roll Number: - Nil - (22 DMIS 0108)

Annual family income: Rs. 1,20,000

Government/NGO Scholarship received: Yes/No

Any other information: - Nil -

I acknowledge that the above-given information provided by me is true. I request you to consider my application for fee concession.

S. Muni Sravani  
Student's Signature

Date: 09-11-22

For Office Use only

The Candidate is sanctioned fee concession in Transportation Academic Fee as the student fulfils the requirements to avail the fee concession.

Recommendation by the Principal	Amount	Signature of the Principal
Yes/ No	<u>15,000/-</u>	<u>[Signature]</u>



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APPLICATION FOR RATNAM SCHOLARSHIP

Date: 14-11-2022

Name of the student: Syed . Aliya

Father's name: Syed . Shabbir Ahmed

Occupation: Private Employee

Program of Study: Pharm D (PB)

Roll Number: Nil

Annual family income: Rs. below 3 lakhs per annum

Government/NGO Scholarship received: Yes/No

Any other information: Nil

I acknowledge that the above-given information provided by me is true. I request you to consider my application for fee concession.

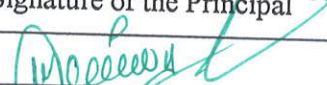
Sd. Aliya

Student's Signature

Date: 14-11-2022

For Office Use only

The Candidate is sanctioned fee concession in transportation Academic Fee as the student fulfils the requirements to avail the fee concession.

Recommendation by the Principal	Amount	Signature of the Principal
Yes/ No	15,000/-	



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RATNAM INSTITUTE OF PHARMACY  
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Recognized u/s 2(f) of the UGC Act 1956, New Delhi)

## NO. OF STUDENTS BENEFITTED BY RATNAM SCHOLARSHIP

Academic Year: 2021-2022

S.NO	Name of the Student	Name of the Parent	Hall Ticket No.	Course
1.	O. Sannutha	O. Venkatesh	21DM1R0071	B. Pharmacy
2.	K. Grishma Sai	K. Ramana	21DM1R0050	B. Pharmacy
3.	B. Yavanika	B. Sreenivasulu	21DM1R0010	B. Pharmacy
4.	K. Poojitha	K. Chandra Sekhar	21DM1T0015	Pharm D



  
Principal

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RATNAM INSTITUTE OF PHARMACY  
Pidathapolur, Nellore Dt. - 524 346

APPLICATION FOR RATNAM SCHOLARSHIP

Date: 22/11/2021

Name of the student: O. Sannutha

Father's name: O. Venkatesh

Occupation: private employee

Program of Study: B. pharmacy

Roll Number: 21DM1R0071

Annual family income: Rs. 300,000/-

Government/NGO Scholarship received: Yes/No

Any other information: —

I acknowledge that the above-given information provided by me is true. I request you to consider my application for fee concession.

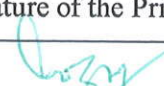
O. Sannutha

Student's Signature

Date: 22/11/2021

For Office Use only

The Candidate is sanctioned fee concession in Academic Fee as the student fulfils the requirements to avail the fee concession.

Recommendation by the Principal	Amount	Signature of the Principal
<input checked="" type="checkbox"/> Yes/ No	75000/-	



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Pidathapalur, Nellore Dt. - 524 346



APPLICATION FOR RATNAM SCHOLARSHIP

Date: 25/11/2021

Name of the student: K. parjitha

Father's name: K. chandra sekhar

Occupation: Teacher.

Program of Study: pharm -D

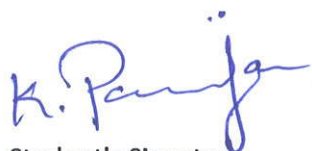
Roll Number: 21DMIT0015

Annual family income: Rs. 3,60,000/-

Government/NGO Scholarship received: Yes/No

Any other information: -

I acknowledge that the above-given information provided by me is true. I request you to consider my application for fee concession.

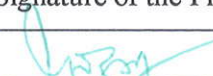


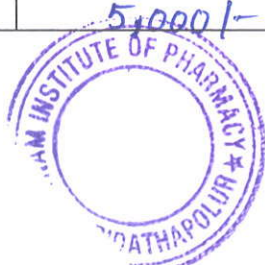
Student's Signature

Date: 25/11/2021

For Office Use only

The Candidate is sanctioned fee concession in Academic Fee as the student fulfils the requirements to avail the fee concession.

Recommendation by the Principal	Amount	Signature of the Principal
Yes/ No	5,000/-	



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## APPLICATION FOR RATNAM SCHOLARSHIP

Date: 27-11-2021

Name of the student: K. Grishmasai

Father's name: K. Ravana

Occupation: Teacher

Program of Study: B pharmacy

Roll Number: 21DMIR0050

Annual family income: Rs. 2,00,000/-

Government/NGO Scholarship received: Yes/No

Any other information: -

I acknowledge that the above-given information provided by me is true. I request you to consider my application for fee concession.

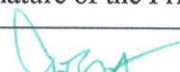
K. Grishmasai

Student's Signature

Date: 27-11-2021

For Office Use only

The Candidate is sanctioned fee concession in Academic Fee as the student fulfils the requirements to avail the fee concession.

Recommendation by the Principal	Amount	Signature of the Principal
Yes/ No <input checked="" type="checkbox"/>	2000/-	



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Pidathapalur, Nellore Dt. 524 346

APPLICATION FOR RATNAM SCHOLARSHIP

Date: 2.12.2021

Name of the student: B.Yavanika

Father's name: B. Sreenivasulu

Occupation: private employee

Program of Study: B.pharmacy

Roll Number: 21DMIR0010

Annual family income: Rs. 3,80,000/-

Government/NGO Scholarship received: Yes/No

Any other information: Nil -

I acknowledge that the above-given information provided by me is true. I request you to consider my application for fee concession.

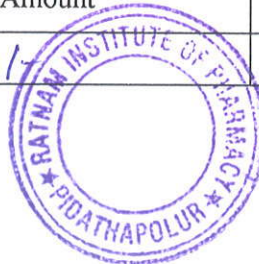
Student's Signature B.Yavanika

Date: 2.12.2021

For Office Use only

The Candidate is sanctioned fee concession in Academic Fee as the student fulfils the requirements to avail the fee concession.

Recommendation by the Principal	Amount	Signature of the Principal
<input checked="" type="checkbox"/> Yes/ No	<u>3000/-</u>	<u>[Signature]</u>



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Recognized u/s 2(f) of the UGC Act 1956, New Delhi)

## NO. OF STUDENTS BENEFITTED BY RATNAM SCHOLARSHIP

Academic Year: 2020-2021

S.NO	Name of the Student	Name of the Parent	Hall Ticket No.	Course
1.	P. Anuhya	P. Prasad	20DM1S0905	M. Pharmacy
2.	G. Sai Sravya	G. Vemaiah	20DM1S0707	M. Pharmacy
3.	J. Vasundhara	J. Raj Kumar	20DM1T0009	Pharm D
4.	M. Vishnu Vardhan	M. Tamilselvan	20DM1T0028	Pharm D



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RATNAM INSTITUTE OF PHARMACY  
Pidathapalur, Nellore Dt. - 524 346

APPLICATION FOR RATNAM SCHOLARSHIP

Date: 7-11-2020

Name of the student: P. Anubha

Father's name: P. prasad

Occupation: private employe

Program of Study: M. pharmacy [pharmacy practice]

Roll Number: 20DM150905

Annual family income: Rs. 3,00,000/-

Government/NGO Scholarship received: Yes/No

Any other information: nil

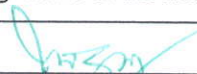
I acknowledge that the above-given information provided by me is true. I request you to consider my application for fee concession.

P. Anubha  
Student's Signature

Date: 7-11-2020

For Office Use only

The Candidate is sanctioned fee concession in transportation Academic Fee as the student fulfils the requirements to avail the fee concession.

Recommendation by the Principal	Amount	Signature of the Principal
Yes/ No	15,000/-	



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Pidathapalur, Nellore Dt. - 524 346

APPLICATION FOR RATNAM SCHOLARSHIP

Date: 20-11-2020

Name of the student: Gr. Sai Savya

Father's name: Gr. Venmaiah

Occupation: Tailor

Program of Study: M. Pharmacy (Pharmaceutical Analysis)

Roll Number: 200M150707

Annual family income: Rs. 300,000/-

Government/NGO Scholarship received: Yes/No

Any other information: -

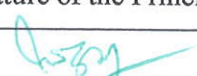
I acknowledge that the above-given information provided by me is true. I request you to consider my application for fee concession.

Gr. Sai Savya  
Student's Signature

Date: 20-11-2020

For Office Use only

The Candidate is sanctioned fee concession in transportation Academic Fee as the student fulfils the requirements to avail the fee concession.

Recommendation by the Principal	Amount	Signature of the Principal
<input checked="" type="checkbox"/> Yes/ No	15,000 /-	



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Pidathapalur, Nellore Dt. - 524 346

APPLICATION FOR RATNAM SCHOLARSHIP

Date: 23-11-2020

Name of the student: J. Vasundhara

Father's name: J. Raj kumar

Occupation: Private Employee

Program of Study: Pharm.D

Roll Number: 20DMIT0009

Annual family income: Rs. 2,00,000 /-

Government/NGO Scholarship received: Yes/No

Any other information: Nil

I acknowledge that the above-given information provided by me is true. I request you to consider my application for fee concession.

J. Vasundhara  
Student's Signature

Date: 23-11-2020

For Office Use only

The Candidate is sanctioned fee concession in Academic Fee as the student fulfils the requirements to avail the fee concession.

Recommendation by the Principal	Amount	Signature of the Principal
<input checked="" type="checkbox"/> Yes/ No		<u>[Signature]</u>



**PRINCIPAL**  
**RATNAM INSTITUTE OF PHARMACY**  
Pidathapolur, Nellore Dt. - 524 346

APPLICATION FOR RATNAM SCHOLARSHIP

Date: 26-11-2020

Name of the student: M. Vishnuvardhan

Father's name: M. TamilSelvan

Occupation: Private Employee

Program of Study: Pharm-D

Roll Number: 20DM170028

Annual family income: Rs. 3,50,000/-

Government/NGO Scholarship received: Yes/No

Any other information: Nil

I acknowledge that the above-given information provided by me is true. I request you to consider my application for fee concession.

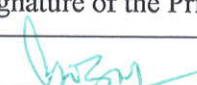


Student's Signature

Date: 26-11-2020

For Office Use only

The Candidate is sanctioned fee concession in Academic Fee as the student fulfils the requirements to avail the fee concession.

Recommendation by the Principal	Amount	Signature of the Principal
Yes/ No	10,000/-	



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RATNAM INSTITUTE OF PHARMACY  
Pidathapalur, Nellore Dt. - 524 346





# RATNAM INSTITUTE OF PHARMACY

(Approved by A.I.C.T.E. & P.C.I., New Delhi, Govt. of A.P., Affiliated to J.N.T. University, Anantapur.  
Recognized u/s 2(f) of the UGC Act 1956, New Delhi)

## NO. OF STUDENTS BENEFITTED BY RATNAM SCHOLARSHIP

Academic Year: 2019-2020

S.NO	Name of the Student	Name of the Parent	Hall Ticket No.	Course
1.	N. Prameela	N. Penchalaiah	19DM1R0050	B. Pharmacy
2.	M. Mallikarjuna	M. Ramesh	19DM1R0044	B. Pharmacy
3.	E. Manjusha	E. Mallikaerjuna	19DM1S0902	M. Pharmacy



  
Principal

PRINCIPAL  
RATNAM INSTITUTE OF PHARMACY  
Pidathapalur, Nellore Dt. - 524 346

## APPLICATION FOR RATNAM SCHOLARSHIP

Date: 11/11/2019

Name of the student: M. Karthik

Father's name: M. Ramesh

Occupation: Farmer

Program of Study: B. Pharmacy

Roll Number: 19DMIR0044

Annual family income: Rs. 1,50,000/-

Government/NGO Scholarship received: Yes/No

Any other information: -

I acknowledge that the above-given information provided by me is true. I request you to consider my application for fee concession.

M. Karthik

Student's Signature

Date: 11/11/2019

For Office Use only

The Candidate is sanctioned fee concession in Academic Fee as the student fulfils the requirements to avail the fee concession.

Recommendation by the Principal	Amount	Signature of the Principal
<input checked="" type="checkbox"/> Yes/ No	Rs. 2500/-	<u>[Signature]</u>



**PRINCIPAL**  
**RATNAM INSTITUTE OF PHARMACY**  
Pidathapalur, Nellore Dt. - 524 346

APPLICATION FOR RATNAM SCHOLARSHIP

Date: 21/11/2019

Name of the student: NPRAMEELA

Father's name: N.PENCHALATHA

Occupation: PRIVATE EMPLOYEE

Program of Study: BPHARMACY

Roll Number: 19DMIR0050

Annual family income: Rs. 3,50,000/-

Government/NGO Scholarship received: Yes/No

Any other information: -


I acknowledge that the above-given information provided by me is true. I request you to consider my application for fee concession.

  
Student's Signature

Date: 21/11/2019

For Office Use only

The Candidate is sanctioned fee concession in Academic Fee as the student fulfils the requirements to avail the fee concession.

Recommendation by the Principal	Amount	Signature of the Principal
Yes/ No	5000/-	



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Pidathapoli, Nellore Dt. - 524 346

APPLICATION FOR RATNAM SCHOLARSHIP

Date: 29/11/2019

Name of the student: E. Manjusha

Father's name: E. Mallikarjuna

Occupation: private employee

Program of Study: M-pharmacy (pharmacy practice)

Roll Number: 19AM150902

Annual family income: Rs. 2,80,000/-

Government/NGO Scholarship received: Yes/No

Any other information: —

I acknowledge that the above-given information provided by me is true. I request you to consider my application for fee concession.

E.M.  
Student's Signature

Date: 29/11/2019

For Office Use only

The Candidate is sanctioned fee concession in transportation Academic-Fee as the student fulfils the requirements to avail the fee concession.

Recommendation by the Principal	Amount	Signature of the Principal
Yes/ No	15,000/-	<u>[Signature]</u>



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Pigathapalur, Nellore Dt. - 524 346



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Recognized u/s 2(f) of the UGC Act 1956, New Delhi)

## NO. OF STUDENTS BENEFITTED BY RATNAM SCHOLARSHIP

Academic Year: 2018-2019

S.NO	Name of the Student	Name of the Parent	Hall Ticket No.	Course
1.	P. Kalyani	P. Rajaiah	18DM1R0062	B. Pharmacy
2.	K. Keerthi	K. Narayana	18DM1R0035	B. Pharmacy
3.	G. Naga Harika	G. Ramesh	18DM1R0017	B. Pharmacy



  
Principal

PRINCIPAL  
RATNAM INSTITUTE OF PHARMACY  
Pidathapalur, Nellore Dt. - 524 346

APPLICATION FOR RATNAM SCHOLARSHIP

Date: 9/11/2018

Name of the student: G. Naga Harika

Father's name: G. Ramesh

Occupation: Tailor

Program of Study: B-Pharmacy

Roll Number: 18DMIR0017

Annual family income: Rs. 2,20,000

Government/NGO Scholarship received: Yes/No

Any other information: Nil

I acknowledge that the above-given information provided by me is true. I request you to consider my application for fee concession.

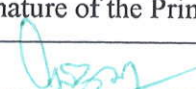
G. Naga Harika

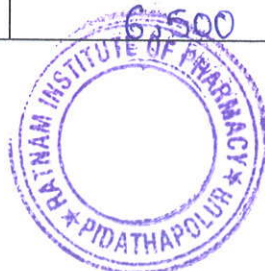
Student's Signature

Date: 9/11/2018

For Office Use only

The Candidate is sanctioned fee concession in Academic Fee as the student fulfils the requirements to avail the fee concession.

Recommendation by the Principal	Amount	Signature of the Principal
Yes/ No	6-500	



PRINCIPAL  
RATNAM INSTITUTE OF PHARMACY  
Pidathapur, Nellore Dt. - 524 346

APPLICATION FOR RATNAM SCHOLARSHIP

Date: 24/10/2018

Name of the student: P. Kalyani

Father's name: P. Rajaiah

Occupation: Tailor

Program of Study: B.pharmacy

Roll Number: 18DMIR0062

Annual family income: Rs. 1,50,000/-

Government/NGO Scholarship received: Yes/No

Any other information: —

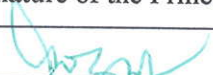
I acknowledge that the above-given information provided by me is true. I request you to consider my application for fee concession.

P. Kalyani  
Student's Signature

Date: 24/10/2018

For Office Use only

The Candidate is sanctioned fee concession in Academic Fee as the student fulfils the requirements to avail the fee concession.

Recommendation by the Principal	Amount	Signature of the Principal
Yes/ No <input checked="" type="checkbox"/>	5000/-	



PRINCIPAL  
RATNAM INSTITUTE OF PHARMACY  
Pidathapolur, Nellore Dt. 524 346

APPLICATION FOR RATNAM SCHOLARSHIP

Date: 6/11/18

Name of the student: K. Keerthi

Father's name: K. Narayana

Occupation: Farmer

Program of Study: B. pharmacy

Roll Number: 18DMIR0035

Annual family income: Rs. 10000/-

Government/NGO Scholarship received: Yes/No  Yes

Any other information: Nil

I acknowledge that the above-given information provided by me is true. I request you to consider my application for fee concession.

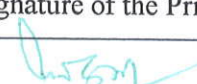
K. Keerthi

Student's Signature

Date: 6/11/18

For Office Use only

The Candidate is sanctioned fee concession in Academic Fee as the student fulfils the requirements to avail the fee concession.

Recommendation by the Principal	Amount	Signature of the Principal
<input checked="" type="checkbox"/> Yes/ No	7000/-	

PRINCIPAL

RATNAM INSTITUTE OF PHARMACY  
Pidathapolur, Nellore Dt. - 524 346

