



BIHAR STUDENT CREDIT CARD SCHEME

VERIFICATION REPORT

Date of Report:

APPROVED

REJECTED

1	Registration ID	7093420
2	Received for Verification on (Date)	
3	Name of the Applicant	SANJANA KUMARI
4	Father's Name	SUNIL PRASAD
5	Name of the Institute In full	HIMALAYA COLLEGE OF PHARMACY
6	Course Applied for	Bachelor of Pharmacy
7	Name of the Competent Authority recognizing the Course *	
8	Roll No.(If available)/Admission Offer No.	
9	Name of the University in full	Patliputra University, Aryabhatta Knowledge University, Bihar
10	University/Institute Recognized by (Name of Regulating Agency) *	University of Health Sciences, Patna
11	Institute Affiliated since (Date) *	
12	Validity of Affiliation up to (Date) *	
13	Certificate no. Of Affiliation Provided by the Institute *	
14	Full Address & Contact details (Landline/Mobile/Email) of the Institute *	
15	Name/Designation/Contact Details of Contact Person of the Institute *	
16	State and District of the Institute	Bihar Patna
17	Category of City In which Institute is situated (A/B/C)	
18	Session (YYYY to YYYY)	2024 to 2028
19	Course Start Date Course End Date	July/2024 November/2028
20	Present Year/Semester of the Applicant *	
21	Fees Charged (Year wise/Semester wise) *	
22	Expected Payment Date of the Fees to the Institute *	
23	Whether the applicant resides/or intends to reside in the institute's Hostel*	
24	Candidate Admitted in the Institute via	Management Quota Entrance Exam or other medium
25	Bank Account Details of the Institute for receiving Fees	
	Type of Fees	Name of Bank Account Holder * Account No. * IFSC Code* Bank Name & Branch *
	Tuition fees	
	Hostel fees	
	Mess fees	
	Any other	
26	Whether Fees required by the Institute through DD, Furnish details	
Note :The above serial no – 25 is mandatory, in case the institute requires different type of fees namely Tuition Fees, Hostel Fees, Mess Fees,etc. in more than one account.If the institute requires all types of fees namely Tuition Fees, Hostel Fees, Mess Fees etc. in only oneaccount, then only single account details of the institute is to be furnished.		

Signature of the Authorized Contact Person of the Institute.

CERTIFICATE OF TPVA

I have verified the above mentioned particulars with respect to the applicant and on the basis of this verification report the applicant's case for sanction of Education Loan by BSEFCL under Bihar Student Credit Card Scheme is RECOMMENDED/NOT RECOMMENDED (Reasons therefor)

Remarks,if any -

Signature of the verifying TPVA Representative