



BIHAR STUDENT CREDIT CARD SCHEME VERIFICATION REPORT

Date of Report : 2024-12-31

Application Status : **Approved**

SNO	PARTICULARS	TPVA REPORT		
1	Registration ID	CM7RBSCC122024007135619		
2	Received for Verification on	2024-12-29		
3	Name of Applicant	KAHKASHAN KAUSAR		
4	Fathers Name	MD SHAHJAHAN		
5	Name of Institute in Full	RADIANT INSTITUTE OF PHARMACEUTICAL SCIENCES		
6	Course Applied for	BACHELOR OF PHARMACY		
7	Name of the Competent Authority Recognizing the Course for the Period / Session mentioned in the Admission Letter	PCI NEW DELHI		
8	Roll No. (If Available) / Admission Offer No.	2024BP03		
9	Name of University in full	ARYABHATTA KNOWLEDGE UNIVERSITY BIHAR UNIVERSITY OF HEALTH SCIENCES PATNA		
10	University / Institute Recognized by Name of Regulating Agency eg. AICTE / UGC / Central Govt / State Govt / Others	U.G.C&PCI ,NEW DELHI		
11	Institute Affiliated since	2023-08-30		
12	Validity of Affiliation upto	2025-03-31		
13	Certificate No of Affiliation Provided by the Institute	6144/2024/1600		
14	Full Address and Contact Details (Landline / Mobile / Email) of the Institute	RADIANT INSTITUTE OF PHARMACEUTICAL SCIENCES RIPS.KISHANGANJ@GMAIL.COM		
15	Name / Designation / Contact Details of Contact Person of the Institute	PRINCIPAL-7461838300		
16	District of Institute	KISHANGANJ		
17	Category of City in which Institute is situated	Catrgory C		
18	Duration / Session of Course	4/2024 - 2028		
19	Course Start Date Course End Date	2024-09-01 2028-09-30		
20	Present Year / Semester of the Applicant	1ST YEAR		
21	Fees Charged (Year wise / Semester wise)	YEAR WISE		
22	Expected Payment Date of the Fees to the Institute	2025-01-31		
23	Whether the Applicant resides or Intend to reside in the Institutes Hostel	YES		
24	Candidate Admitted to Institute via	ENTRANCE EXAM		
Serial No 25 is mandatory, in the case Institute requires different types of fees namely Tuition Fees, Hostel Fees, Mess Fees, etc. in more than one account. If the Institute requires all type of fees namely Tuition Fees, hostel Fees, Mess Fees, etc. in only one account, then only one single account details of the Institute is to be furnished.				
25	Bank Account Details of Institute for receiving Fees			
Type of Fees	Name of Bank Account Holder	Account Number	IFSC Code	Bank Name & Branch
Tuition Fees	RADIANT INSTITUTE OF PHARMACEUTICAL SCIENCES	3148201000415	CNRB0003148	CANARA BANK, CHURIPATII KISHANGANJ
Hostel Fees				
Mess Fees				
Other Fees				
26	Whether Fees required by the Institute through DD, Furnish details			
27	Location	26.177956 87.970918		

CERTIFICATE OF TPVA

I have verified the above mentioned particulars to the best of my knowledge. The information provided by the institution and on the basis of this verification report, We are submitting the report to Depart of Education, Bihar.

Remarks, If Any

APPROVED BY MTCPL

SIGNATURE OF THE VERIFYING TPVA REPRESENTATIVE

NAME OF VERIFICATION OFFICER

Ashish Ranjan

Verified by
TPVA (Bihar)-MTCPL
BSCC