

JAWAHARLAL NEHRU TECHNOLOGICAL UNIVERSITY ANANTAPUR ANANTHAPURAMU - 515002.AP (INDIA)

EXAMINATIONS BRANCH

Prof. S.V. Satyanarayana, Director of Evaluation. DATE: 12.07.2018

To
The Principals
All Affiliated Colleges
(Affiliated to JNT University Anantapur offering M.Pharm Program)

<u>Lr.No.DE/JNTUA/Examination Branch/ M.Pharm/II Year/Remittance of fee towards common services rendered by the University/ 2018 - 2019 Dt. 12.07.2018</u>

Sir,

<u>Sub: JNTUA, Anantapur - Examination Branch - M.Pharm (2018-2019) - II year - Remittance of fee towards common service rendered by the University - Reg.</u>

Ref: 1. G.O.Ms.No. 43 of Higher Education (EC/A2) department dated: 25/06/2016

As per the Government Orders (GOs) cited above, you are requested to take note of the following. The private pharmacy colleges are permitted to collect

> Rs.1850/- per student of second year towards the common services rendered by the University to all the Colleges and such amount collected by the college shall be remitted to the concerned university.

In view of the above, the colleges are required to remit an amount of Rs.1850/- towards the Common services rendered by the University per candidate of the present second year M.Pharm.

The prescribed fee collected from the students has to be paid through <u>Online transfer into Power Jyothi Account SBI, JNTUEC branch, (Account No.32950804752, IFSC Code: SBIN0002723) OR Power Jyothi Account AB, JNTUEC branch, (Account No.225410100000131, IFSC Code: ANDB0002254). The receipts/challans should be submitted for account verification purpose. <u>Transaction date should not be later than 27.07.2018 (Friday).</u></u>

The consolidated list of the second year M.Pharm students admitted (enclose attested photocopy of the clearance certificate issued at the time of entry) along with the <u>receipts/challans</u> should be sent by speed-post/registered post so as to reach the office of <u>the Controller of Examinations</u> by <u>31.07.2018</u> without fail. Please Super scribe the cover as <u>UCS Fee 2018-19 M.Pharm/II Year/<College Code > .</u>

Yours Sincerely

Director of Evaluation

Copy to
PA to Hon'ble Vice Chancellor for favor of information
The Registrar
The Controller of Examinations (PG & UG)
Additional Controllers of Examinations
File.