

ALL INDIA INSTITUTE OF MEDICAL SCIENCES, BATHINDA

JODHPUR ROMANA, MANDI DABWALI ROAD, BATHINDA, PUNJAB- 151001

ਅਖਿਲ ਭਾਰਤੀ ਆਯੁਰ ਵਿਗਿਆਨ ਸੰਸਥਾਨ, ਬਠਿੰਡਾ अखिल भारतीय आयुर्विज्ञान संस्थान, बठिंडा

UNDER GRADUATE EXAMINATION FORM

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		Examination Form No.
	idate Enrolment No:	
To,		
Examination Section		
AIIMS, BATHINDA		
I request permission to present muself in MDI	BS_	Professional/Supplementary
I request permission to present myself in MBI Examination to be held in Oct-Nov of Year	•	Professional/Supplementary
I furnish my details as stated below: -		
1. CANDIDATE'S NAME in CAPITAL Letters (St	rictly as per Class XII or G	GAZETTE Notification):
2 CANDIDATES'S NAME := DEVALACIDI SCRID	T / Uindi / Ctrictly on nor C	loss VII or CAZETTE Natification)
2. CANDIDATES'S NAME in DEVNAGIRI SCRIP	i (minui)(Strictly as per C	lass All of GAZETTE Notification)
3. MOTHER'S FIRST NAME in CAPITAL Letters		
3. MOTHER 3 FIRST MAINE III CAPITAL LECTERS	•	
4. FATHER'S /HUSBAND NAME in CAPITAL Le	tters:	
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5. Candidate's Postal Home Address in CAPIT	AL Letters :	
State:	Pin code:	
Contact No. :		
6. Email Address:		
7. Sex Male	Female	8. Date of Birth (As per Class-XCertificate)
• • • • • • • • • • • • • • • • • • •	○ -	Date Month Year
9. Nationality Indian	Foreign	
10. If Physically Handicapped Yes	○ No	
11. Appearing as Fresh	Repeat A	ttempt
		Affix Stamp
		Size Photo
Left Hand Thumb Impression	Signature of Candidate	

Sr.No.	Subject Name	Subject	
		Code	
	<u>DEC</u>	<u>CLARATION</u>	
1) I hereby declare that I have not availed of any attempt (including the present one) in excess of the maximum			
attempts permissible, by AIIMS Bathinda for the said examination. 2) I hereby declare that I have gone through the syllabus prescribed.			
· ·		cted for any errors, wrong or incomplete entries made by me in	
	e examination form.		
	ereby declare that I shall not claim any concession not defying the criteria of the admission order		
-		ate declared by the Institute for grant of terms.	
Place:			
Date:		Signature of Candidate	
ATTESTATION BY THE DEAN			
I certify that Shri/Smt/Kumari s a bonafide student of this college and has satisfactorily			
	ended the classes and	s a bollance student of this conege and hassatisfactorily	
		ed by the Institute in lecture teaching and practicalwork.	
2. 3.	Eligibility in cases of NRI, AI, etc. has already be He/she was allowed / not allowed to appear for		
4.	The candidate has completed that academic te	erms and appeared in mandatory number of internal assessment	
5.	tests as per the Institute rules (wherever applic He/She is not admitted to the course after the		
	That the information furnished by the said cand	didate is verified from his/her documents and that the Candidate	
	is Eligible /Not Eligible to appear for Institute E	examination.	
Pla	ce:		
5 - •	<u> </u>	Cionatuna O Caal afaba	
Dat	e:	Signature & Seal of the	
		Associate Dean (Examination)	
		AIIMS, Bathinda	