

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.	
C	andidate Enrolment No:		
To, Examination Section AIIMS, BATHINDA			
Supplementary Examination to be held in I furnish my details as stated below: -	the month of Y		al
1. CANDIDATE'S NAME in CAPITAL Letter	s (Strictly as per Class XII or G	GAZETTE Notification):	
2. CANDIDATES'S NAME in DEVNAGIRI SO	CRIPT (Hindi)(Strictly as per Cl	ass XII or GAZETTE Notification)	
3. MOTHER'S FIRST NAME in CAPITAL Let	tters :		
4. FATHER'S /HUSBAND NAME in CAPITA	L Letters :		
5. Candidate's Postal Home Address in Ca	APITAL Letters :		
State:	Pin code:		
Contact No. :			
6. Email Address:			
7. Sex	ale Female	8. Date of Birth (As per Class-XCertificate)	
9. Nationality	ian Foreign	Date Month Year	
10. If Physically Handicapped O Yes	No		
11. Appearing as Fre	sh Repeat At	ttempt	
			-
		Affix Stamp Size Photo	
Left Hand Thumb Impression	Signature of Candidate		

Sr.No.	Subject Name	Subject Code	
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	<u>DE</u>	<u>CLARATION</u>	
attem 2) I herek 3) I shall the ex 4) I herek 5) I am no	by declare that I have not availed of any attempts permissible, by AIIMS Bathinda for the same of the	aid examination. bus prescribed. cted for any errors, wr on on religious ground. r.	ong or incomplete entries made by me in
	ATTESTA	TION BY THE DEAN	
attend 1. His	that t/Kumarided the classes and s/her attendance is not less than as prescribe gibility in cases of NRI, AI, etc. has already be	ed by the Institute in le	ecture teaching and practical work.
3. He 4. The tes	e/she was allowed / not allowed to appear for e candidate has completed that academic te sts as per the Institute rules (wherever applice e/She is not admitted to the course after the	or previous examinatio rms and appeared in n able).	nandatory number of internal assessment
6. Th	at the information furnished by the said can Eligible /Not Eligible to appear for Institute E	didate is verified from	
Place:			
Date:			Signature & Seal of the
			Dean (Examination) AIIMS, Bathinda