

	<p><b>ALL INDIA INSTITUTE OF MEDICAL SCIENCES, BATHINDA</b>          JODHPUR ROMANA, MANDI DABWALI ROAD, BATHINDA, PUNJAB- 151001          ਅਖਿਲ ਭਾਰਤੀ ਆਯੁਰਵਿਗਿਆਨ ਸੰਸਥਾਨ, ਬਠਿੰਡਾ ਅਖਿਲ ਭਾਰਤੀ ਆਯੁਰਵਿਗਿਆਨ ਸੰਸਥਾਨ, ਬਠਿੰਡਾ</p> <p align="center"><b>Examination Cell</b></p>	
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No. AB/EXAM/2025/163

Dated. 19/5/25

**NOTICE**


It is hereby notified to the **Final Professional Supplementary MBBS Examination Batch- 2020** students to comply with the following instructions for filling up the examination forms for **Final Professional Supplementary MBBS Examination to be held in June/July 2025.**

Particulars	Form Submission (Start Date)	Form Submission (Last Date)
Examination Form Filling Date	20 MAY 2025	23 MAY 2025

**Note: -**

1. Examination Fee = Rs. 200 per subject. (Fee should be deposited in the Account section)
2. Student can download the Examination Form from Institute website.
3. Student must submit one additional passport size photograph along with the Examination Form in the Examination Cell.
4. Timing of the submission of Examination forms between **02:00PM to 05:00PM.**



  
**Prof (Dr.) Gitanjali**  
**Dean (Examination)**

**Copy to:**

1. The Director, AIIMS Bathinda
2. DDA, AIIMS Bathinda
3. Dean (Academic), AIIMS Bathinda
4. ACoE, AIIMS Bathinda.
5. Concerned HoD's.
6. Incharge IT Cell (For Uploading the Notice on Institute Website)
7. Account Officer (For collecting the Examination Fee)
8. All Notice Boards