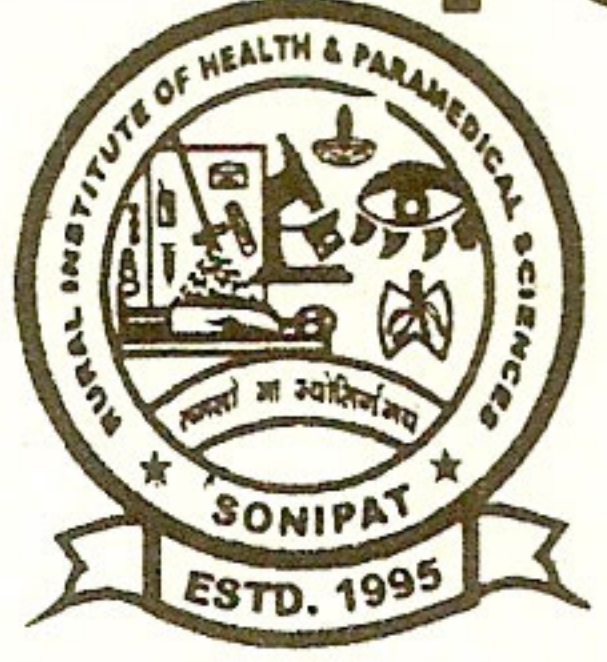
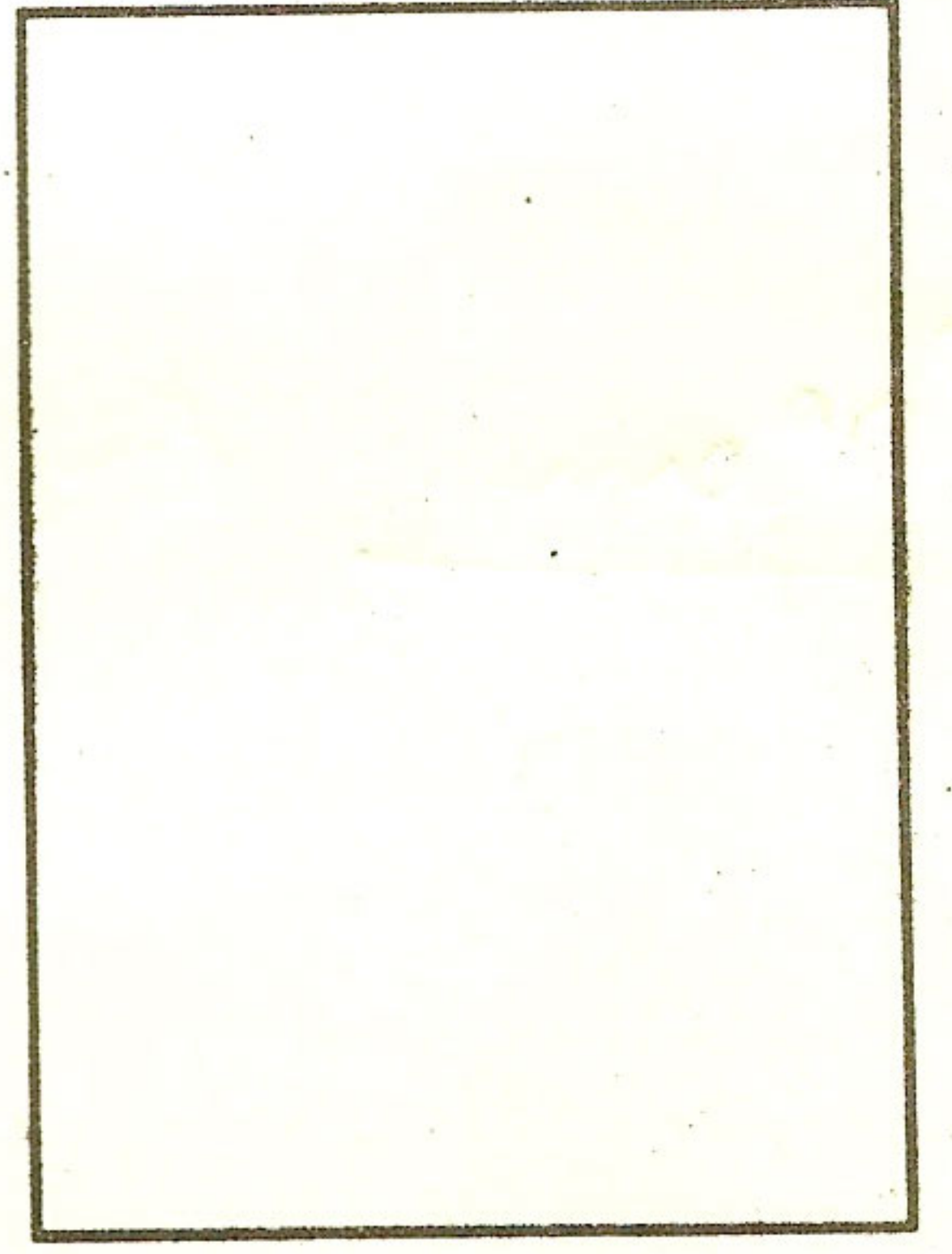


S.No. (Office use)

पैरा मेडिकल व नर्सिंग



प्रवेश Admission form



1. NAME :
2. FATHER/HUSBAND NAME :
3. D.O.B. as per Matric Certificate :
4. Postal Address :
..... (Phone No.).....

5. Academic Qualification :-

S.No.	Exam Passed	Year	Board/ University	Marks obtained	%age of marks
1.					
2.					
3.					
4.					

6. Course applied for :
7. Do you belong to Reserve category SC/ST/BC or if yes specify
(if yes attach certificate).

8. Registration Charges (Rs. 100/- & 50/- SC/ST)	Amount	Postal No./ DD No.	Bank/ P.O Name

9. Document Attached
1.
2.
3.
4.

Declaration :- I hereby declare that all the above informations furnished, are correct to the best of my belief and knowledge.

Place :

Date :

Signature of Candidate.....