## LORD MAHAVIRA HOMOEOPATHIC MEDICAL COLLEGE & HOSPITAL

KITCHLU NAGAR, CIVIL LINES, LUDHIANA - 141 001 (Pb.) INDIA (Affiliated with Guru Ravidas Ayurved University Punjab, Hoshiarpur)

## B.H.M.S. COURSE - (SESSION 20 )

		•							
Applicant's Name									
Date of Birth	dd mm	уу							
State of Domicile									
Nationality									
Father's Name									
Occupation		Yearly	Income	(Rs/US \$) :					
Mother's Name									
Occupation Yearly Income (Rs/US \$):									
Please tick (√) the appropriate box									
Class: Urban R	Rural Sex: M	1ale Female		Married	: Yes	No 🗌			
Category : Go	ovt Seat Gene	eral S	c 🗌	ST		вс 🗌			
Manageme	ent Seat Gene	eral S	SC ST BC						
	NRI Any ot	her							
Details of Examination	n nassed								
Examination Year of Passing	School / College	Max. Marks	Marks Obtained	%	No. of Attempts				

N:	ame of competitive Test .														21 2 23274			
	3. 33mpoudvo 163t.													_				
A	ppeared : Yes No	о 🗌	Roll No	). <u> </u>					Ran	k No	o. [							
М	arks Obtained		Max. M	/larks[														
Permanent Address																		
				*******												cincincincincin i		
City	·			*********			Pin	Cod	le									
STE	O Code	Те	elephon	ne No.						Fax	( No	)				C KOM MONOMO		
Mai	ling Address																	
City	·						******		******	Pin	Co	de				THE WINDS THE THE		
STE	STD Code Fax No Fax No																	
E-m	nail ID																	
Loc	al Guardian's Name																	
Rela	ationship with Applicant				•	1			1	•						•		
Add	Iress							<u> </u>	*********					****				
		************			*****	*****												
If ac	dmitted, I undertake to :																	
(i)	Abide by the rules given	n in the C	ollege	Prosp	ectu	ıs w	nich I	ha	ve rea	ad 8	k un	ders	too	d th	orc	ougł	າly ;	
(ii)	Submit Clearance Certifin due course of time (Fe								signa	ted	Cor	npet	ent	t <b>A</b> u	tho	rity,		
(iii)	Submit photocopy of the	e passpo	rt show	ing st	ude	nt vi	sa ( <b>F</b>	or I	NRI/	For	eigı	ı Ca	ndi	idat	tes	onl	<b>y</b> ).	
											Sigr	natur	e c	of th	е А	ppli	cant	

Warning : Incomplete applications will not be considered.

The college prospectus must be read carefully.

## LORD MAHAVIRA HOMOEOPATHIC MEDICAL COLLEGE & HOSPITAL

KITCHLU NAGAR, CIVIL LINES, LUDHIANA - 141 001 (Pb.) INDIA (Affiliated with Guru Ravidas Ayurved University Punjab, Hoshiarpur)

## APPLICATION CUM ADMISSION FORM FOR B.H.M.S. COURSE - 20....

	APPLICATION CUM ADMISSION FORM FOR B.H.M.S. COURSE - 20							
	For Office use only							
	Registration No.	Affix recent						
	Date of Receipt	Passport size colour photograph						
	Application Status							
	Remarks							
	Signature (Checking Authority)							
	TO BE FILLED BY THE CANDIDATE							
	ne Principal							
	rd Mahavira Homoeopathic Medical College & Hospital dhiana - 141 001, Punjab (India)							
	ear Sir,							
	m applying for admission to B.H.M.S. Course 20, <b>Under Category</b>							
Th	e following documents are sent herewith by Registered AD / hand delivery for the	said purpose						
(T	ick as applicable) :							
1.	Appendix-2 duly signed and attested by a Notary Public.							
2.	77	3 to be filled at the						
	time of interview in India.							
3.	1 12	Examination from						
	any University / Board showing detailed marks / explanation sheet of grades.							
4.	. , , , , , , , , , , , , , , , , , , ,	(Diale						
5.	Attested photostat copy of Higher Secondary / High School Certificate showing Date of							
6. 7.	Attested photostat copy of good conduct from the Principal of the School / College last Three attested copies of recent colour photographs (Passport size) showing full							
1.	shoulders only, with name on the back side of each photograph.	lace, lieau allu						
8.		nency (For Govt. /						
	Management Category seats only).	,						
9.								
	a. Crossed Bank Draft for US Dollars 500 in favour of							
	"LORD MAHAVIRA MEDICAL COLLEGE & HOSPITAL, LUDHIANA."							
	(Draft No)							
	b. If payment by cash (Receipt No Dated)							
	c. Photostat copy of the Passport (in case of NRI / Foreign candidates.)							
	I undertake that I shall submit all the original certificates at the time of admiss	sion. Mv detailed						
	particulars are submitted herewith.	-						
		Yours Faithfully,						
	DTE : Candidate applying under category like heduled Castes, Scheduled Tribes or Backward							
Cla	ass, are required to submit respective certificates	Signature						
	parding their class. Such certificates must be ned by the S.D.M. or Distr. Welfare Officer. Full Name							