





# APPLICATION FORM

## DMIMS(DU) - AI PGM CET - 2015

11. MBBS Marks :	Month - Year of Passing	Marks obtained	Out Of	% of Marks
First MBBS	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Second MBBS	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Third MBBS (Part - 1)	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Third MBBS (Part - 2)	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Aggregate		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

12. DD No.

13. Bank Name \_\_\_\_\_ Branch \_\_\_\_\_

### 14. Subject Preference for P.G. Courses

Degree 1) _____	DIPLOMA 1) _____
2) _____	2) _____
3) _____	3) _____

15. Exam center DMIMS(DU) AI PGM CET 2015      NAGPUR



## DECLARATION

1. I hereby solemnly and sincerely affirm that the statements made and information given by me in the application form is true and correct.
2. I agree to abide by the Rules, Regulations and Procedures as contained in the information Brochure.
3. At present, I have not taken admission to any Postgraduate Health Science course in the previous year (s). I further declare that, if it is proved that I have secured admission for any of the PG Course earlier / discontinued after taking admission, my current year's admission shall be cancelled.
4. I **agree** to submit all the required original certificates at the time of my selection during admission process as per the rules, failing which my claim for selection shall not be granted.
5. I have not concealed any material, information, however, if any information submitted herein is fraudulent, incorrect or untrue, I understand that I am liable to criminal prosecution and I also agree to forgo my seat in **University**. I understand that the selection and admission to the course is also liable to be cancelled.

Date: \_\_\_\_\_

Place: \_\_\_\_\_

(Signature of the Candidate)



## INSTRUCTIONS

### Instructions for filling up of forms

1. Read all the instructions in the Brochure before filling the forms.
2. **Write with black ball point pen in boxes using English Capital Letters.**
3. Do not make any stray marks on this form.
4. Do not staple, pin, wrinkle, scribble, tear, wet or fold the main application form.
5. While writing MBBS Marks, exclude grace marks.

### List of Enclosures with Form

1. Nationality Certificate or valid passport.
2. Proof of Age
3. Statement of MBBS marks :
  - 3.1 First year MBBS
  - 3.2 Second year MBBS
  - 3.3 Third MBBS Part I
  - 3.4 Third MBBS Part II
4. MBBS Degree / Passing certificate.
5. Attempt Certificate of all University Examinations
6. Internship completion certificate OR Certificate indicating the likely date of completion of Internship.
7. Registration certificate of MMC / State Council / MCI.
8. Declaration that he/she is not undergoing PG course in any other institution.

## IMPORTANT INSTRUCTIONS TO CANDIDATES

1. Candidate must preserve the Receipt-cum-identity Card and Admit Card safely and bring to the examination hall and produce the same on demand by the examination staff.
2. Candidate should be present in the examination hall at least Thirty minutes before examination begins.
3. All details like Roll number, Question booklet number, must be entered carefully on the answer sheet and the question booklet.
4. No candidate will be allowed to leave the examination hall in the middle of the examination.
5. In case of loss of Admit card, it shall be obligatory on the part of the candidate to procure duplicate Admit Card from the examination centre incharge not later than one hour before the commencement of examination with sufficient evidence to prove that he/she is the genuine / bonafide examinee (Receipt cum Identity Card issued by the Notified Centre.)
6. All entries on answer sheet must be made only with Black ball pen.
7. Photograph on application form, Receipt cum Identity Card, Authority letter or any other document of DMIMS(DU) AIPGM CET-2015 should be taken from the same negative.
8. Please note that admit card is just an enabling provision for appearing DMIMS(DU) AIPGM CET-2015 and does not imply that the candidate satisfies all the requirements of eligibility conditions of admission.
9. All further correspondence will require quoting of your application number.
10. All payments to be made by CASH/DD's in favour of Competent Authority DMIMS(DU) payable at Nagpur & have Application number and Candidate Name written at it's back side.
11. In case of Admit Card not received by post, the office of DMIMS (Deemed University), should be contacted immediately for duplicate admit card.

12. **Date of Exam - 25/01/2015 Time - 1 pm to 4.30 pm**
13. **Last Date of Submission of form - 15/01/2015**
14. **Submission of Application form - Datta Meghe Institute of Medical Sciences (DU), Atrey Layout, Pratap Nagar, Nagpur - 22.**