

HIMACHAL PRADESH UNIVERSITY, SHIMLA-5

Roll No. _____
(To be assigned by the office)

ADMISSION FORM FOR THE MBBS-_____/BDS _____ EXAMINATION
DATE OF COMMENEMENT OF EXAMINATION _____ 201__

LAST DATE FOR RECEIPT OF FORM AND FEE: WITHOUT LATE FEE UPTO _____

- (I) With a late fee of Rs.1200/- upto 15 days after the last date
- (II) With a late fee of Rs.3600/- upto 20 days after the last date
- (III) With a late fee of Rs.20000/- in very special circumstances with the permission of the Hon'ble Vice-Chancellor.

Examination admission fee for MBBS I to II (Regular: Rs. 5000/- ; Reappear: Rs.1000/- per paper)

Examination admission fee for MBBS Final I to Final Prof.-II (Regular: Rs.6000/-; Reappear Rs.1000/- per paper)

Examination admission fee for BDS (Regular: Rs.4000/-; Reappear r Rs.1000/- per paper)

Particulars to be filled in by the Candidate Neatly and Legibly in His/Her own Handwriting

1. Name (in block letters) (in English) _____ (in Hindi) _____
(Name written here should be the same as already registered)
2. Men or Women _____ 3. Registered No. (Mandatory) _____ (Enrollment)
4. Do you belong to Scheduled Caste/Backward class/Scheduled Tribe? (State one applicable)
_____ (a) Date of Birth _____
5. Permanent or Home address _____
6. Domicile (For Domicile write name of the State) _____
7. Father's Name (in block letters) _____ (in Hindi) _____
8. Year of passing the previous Professional Exam _____ Month _____ Year _____
Roll No. _____
9. Centre at which to be examined _____
10. Subjects in which to be examined
1. _____ 2. _____
3. _____ 4. _____
11. For candidates who failed but permitted to re-appear in the subject under exemption or compartment rules:-
For first time, Year _____ Month _____ Roll No. _____
For second time, Year _____ Month _____ Roll No. _____
For third time, Year _____ Month _____ Roll No. _____
For fourth time, Year _____ Month _____ Roll No. _____
For last time, Year _____ Month _____ Roll No. _____

Subject in which permitted to re-appear _____

12. For failed candidates. Yes in which appeared for the first time _____
Month _____ Roll No. _____

13. Have you ever been disqualified by the any University from appearing in any Examination? Is so, give period for which disqualified _____
and name of University or Board from which disqualified _____
OR

Is any case of unfair means is pending against you? If so, give name of examination _____

Year and Session _____ Roll No. _____ (University or Board in which the case is pending _____)

14. University/Fee Receipt No. _____ Dated _____
Amount _____ Bank Draft/Cheque No. _____

I solemnly declare that the particulars filled in above are correct and that if any discrepancy is found herein, I shall be responsible for the consequences.

Dated _____

Signature of the candidate

CERTIFICATE

I certify that the candidate mentioned in this form has satisfied be by production of authentic documents, that statement made by him/her in the form is correct, that he/she has attended not less than three quarters of the full courses of lectures delivered in each of the subjects, that he/she has fulfilled the conditions laid down under the 1st Ordinances in force, that he/she is of good moral character and that he/she has himself/herself filled up and signed this admission form. The fee of Rs. _____ has been sent by the candidate, vide University fee Receipt No. _____
Dated _____ Amount _____

Remarks if any :

PRINCIPAL
(Signature with Seal)

ADMIT CARD

PROVISIONAL

Roll No. _____

(Roll No. to be written by the Candidate)

**Affix your latest
colour attested
passport size
photograph.**

Do not staple

(To be filled in by the Candidate)

Admit (Name of the Candidate) _____

son/ Daughter of Sh. _____

to the MBBS/BDS (Pass Course) _____ Semester/Year Examination to be

held in _____ 201_____ on the dates as given in

the Date Sheet at Centre of Examination _____

Signature of Candidate

Controller of Examinations
Himachal Pradesh University.
