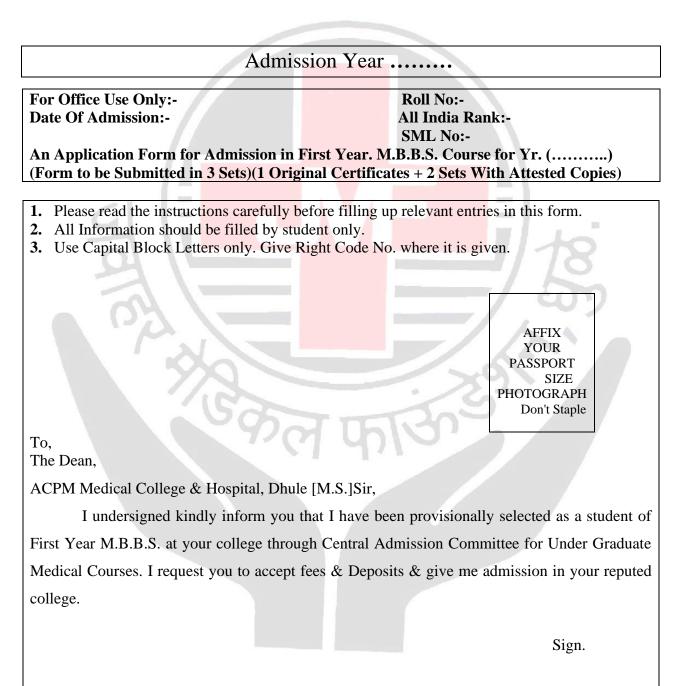
JMF'S

A.C.P.M Medical College & Hospital, Dhule. Admission Form



personal details

1. (a) Candidate's Name (As Per 12 th Mark Sheet):-					
Mr/Miss					
(Surname)	(First Name)	(Father's Name)			
(b) Candidate's Father's Mr.	Full Name:-				
(Surname)	(First Name)	(Father's Name)			
2. Father / Guardian's O	ccupation:-				
- E					
911					
3.Full Postal Address Of	Candidate For Correspondenc	e:-			
House No:-	Villag <mark>e:-</mark>	City:-			
Street Name:-	Talu <mark>ka:-</mark>				
District's Name & its F	in Code No:-				
4. Date Of Birth:-					
(DD/MM/YEAR)		· 25-			
	POLT IN	30			
5. Birth Place With District & State:-					
6. Contact No:-					
a) Residence With STD Code:-					
b) Mob. No. Student:-					
c) Mob. No. Father:-					
7. Admission Category: -					
a) Open:- OM b) S.C:-SC c) S.T:- ST d) S.E.B.C:- SE e) MQ-OPEN:-MQ					

8. Aadhar No. (Mandatory):-						
9.As per School Leaving Certificate/Record:-						
a) Religion:- b) Cast:- c) Sub Cast :- d) Category:-						
10.Name Of H.S.C Examination:-						
11. Month & Year of H.	S.C. Exam. Ap	p <mark>eared:-</mark>				
12. Exam Seat No. / Roll	No:-					
4						
13. Subject Wise Marks			12			
Eng.	Chem.	Bio.	Phy.			
- M						
· ~						
14. a) Marks Obtained in	P+C+B Subject	s in H.S.C. Exam. Of Bo	ard: /300 or 210			
b) Marks Obtained in	b) Marks Obtained in NEET – 2020 Exam (Entrance Test): /720					
c)Percentile in NEET	UG – 2020:	TING				
15. Name Of Last School Attended with place of H.S.C. Exam:-						
16 School Leaving Cert	ificato / Transf	ar Cartificata No. & Da	te Of Issued Of Certificate:-			
No:-		Date:-	te of issued of certificate			
		Date				
17. Annual Gross Income Of Family (Father + Mother + Other)						
Rs.						
18. Do You Require Hostel Yes/ No.						
19. Name & Address Of Local Guardian With Mob. No:-						
			Sign.			

I have attached the following Original Certificates/Documents

with 2 attested Xerox set with admission form.

Sr. No.	Certificates	Tick	
1	Application Form (Attested photocopy)		
2	Preference Form (Attested photocopy)		
3	Nationality Certificate or valid passport		
4	S.S.C. (10 th) Passing Certificate & Mark sheet		
5	H.S.C (12 th) Passing Certificate & Mark sheet		
6	Attempt Certificate (if available)		
7	Bonafide Certificate		
8	NEET UG Admit Card		
9	NEET UG Mark sheet	1	
10	Caste Certificate	15	
11	Caste Validity Certificate	Ċ	
12	Non-Creamy layer Certificate		
13	Migration Certificate		
14	Leaving / Transfer Certificate		
15	Gap Certificate		
16	Allotment Letter		
17	Physical Fitness	/	
18	Character Certificate		
19	Aadhar Card & Pan Card Xerox/ Voter Card Xerox /passport Zerox		
20	Passport size Photograph – 2		

Sign.

: DECLARATION:

All the information given in this Admission Form for Admission 2020-21 is correct and true as submitted in the Application Form at Central Admission Committee for Undergraduate Medical Courses as per best of my knowledge. We read and understood the rules of Admissions. We agreed/abide to follow all rules of college & University.

Most Important :

Students & Parents are Directed To Keep 10 (Ten) Attested Xerox Copies Sets Of Each Under Mentioned Documents For Future Requirement. Original Certificates Or Attested Zerox Copies Will Not Be Provided To Student Up To The Completion Of Final M.B.B.S. Course.

Date : / /2020					
- 04 V-	Sign. <mark>of Father/M</mark> oth	er Sign. of Student			
For the Use of Student Section					
Shri/Ku		has paid Tuition			
Fee Rs vide Receipt No. Date : / /2020					
through DD/RTGS/NEFT vide Bank & Branch Name:					
and necessary document received from the student, necessary for the student admission as					
per rules and regulations prescribed by Competent Authority, Government of Maharashtra.					
Verified by Account Section		Sr. Clerk/ Head Clerk Student Section			

For the Use of Dean Office

The above information and necessary documents checked and found correct so please grant the admission at the ACPM Medical College & Hospital, Dhule, M.S.

Student Section

1

Admission I/C

Sq

Dean

/2020