

## महाराष्ट्र आरोग्य विज्ञान विद्यापीठ,नाशिक

## MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

UNDER-GRADUATE / POST GRADUATE EXAMINATION FORM

MU										
Academic Bank of Credit (ABC) ID.:										
			<b>Examination Form No.</b>	:						
To,	Controller of Eveninetics	_	Callaga Cada							
	Controller of Examinations S, Nashik.	91	College Code	•						
	,	University Eligibilit	ty Status							
Sir,	Admitted Aca	d. Eligibility Sattu	s Eligibility	UG PG						
	Year	(specity only one: Gran Granted, Provisionally (		FRESH REPEATER						
				(Please √ Mark)						
I rea	uest permission to present	myself at the ensui	na							
	amination to be held in	half of I f	furnish my details as stated b							
1.	CANDIDATE'S NAME In C	apital Latters (Strictly	as per Class XII or GAZETT	E Notification): English						
	(Surname)	(F	irst Name)	(Middle Name)						
(	CANDIDATE'S NAME In 1	-	11001 (41110)	(2.22 data)						
2.	MOTHER'S FIRST NAMI	E in Capital Letters:								
3.	FATHER'S/HUSBAND FI	RST NAME in Capit	tal Letters:							
4.	Candidate's mailing addre	ss in CAPITAL Lette	ers only:							
			Pincode							
5.	State:		Filicode	•						
5. 6.	College Name:									
7.	Email Address:									
8.	Adhar No.									
9.	Mobile (Adhar Linked):									
10	Mobile (Whats App):									
11	Gender : MALE:	••								
12	Date of Birth :									
	Date	Month Year								
13	Date of Admission :									
14	Admitted in Academic Yea	te Month Year								
14	Total Maximum Attempts									
15	Centre Council / University	_								
16	Date of Fee Payment by Stud									
		Date	Month Year	Left Hand Thumb Impression						
17	<b>Current Exam Attempt</b>									
				Signature of Candidate in running hand,						
				within the box						

18. Fees Details of Student								
Sr. No		Headwise Details of fee		Amount				
	1							
	2							
	3							
	4							
	5							
Total								
19. List of Documents/Items to be attached/verified:								
Sr. No.	Particulars				Documents attached Yes/No	For College Use only	For MUHS Use only	
1.	Photograph de	uly attested by the Dean/Principal						
2.		marks statement of latest examination						
3.	Photocopy of Applicable)	Eligibility letter (For First year Students only) <b>OR</b>	Transfer let	ter (If				
4.		nts ABC ID No (Photocopy and Soft Copy)						
FO	R PG STUDENT	S, following document is also to be submitted	:	<u> </u>				
5.		ertificate of Research Methodology workshop						
6.	other Facultie							
7.	Students pass University.	sed out from other Universities, UG Degree certific	cate of resp	ective				
NO	TE: Incomplete	Examination form and without documents wil	l be rejecte	ed by the Ur	niversity.			
20. D Sr.	ress Code: Particulars						Yes/No*	
No.	0.							
1.	[(If Yes, it is mandatory to reamin present at Examination Centre before 01 hour of commencement of							
University examinations for proper frisking (checking)].  I will be appearing for the following Subjects (for Subject Name and Subject Code, please refer Theory Time-Table								
published by the University on the website):-  For Fresh Students Only								
Sr.	Subject	Subject Name Attendance %		<u>Students c</u>	tudents only			
No	Codes	•	Theory	Practical	HOD I	Name	HOD Sign	
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								

## **DECLARATION BY THE CANDIDATE**

- 1) I am aware that, I have to fulfill criteria of attendance prescribed by the University up to commencement of Examination, failing which I shall be held "NOT ELIGIBLE" and will not be allowed to appear for Examination.
- 2) I hereby declare that I have not availed of any attempt (including the present one) in excess of the maximum attempts permissible by Central Council / University for the said examination (wherever applicable).
- 3) I hereby declare that I have gone through the syllabus prescribed and relevant rules of Ordinance 1/2014 (amended) Heads of Passing which are applicable for the examination for which I am appearing and I accept the same without any challenge (wherever applicable). Reference Ordinance 01/2014 rule 59, 60 & 62 for head of passing and Grace Marks) OR as applicable from time to time.

	passing and Grace Marks) OR as applicable from time to time.
4)	I shall be responsible if my application form is rejected for any errors, wrong or incomplete entries made by me in
5)	the examination form. I hereby declare that I shall not claim any concession on religious ground.
	I am not defying the criteria of the admission order.
•	I am not admitted to the course after the cut-off date declared by the University for grant of terms.
	If "Yes" option is opt for wearing Traditional/Cultural Dress during Theory Examinations, then I will
<u>re</u>	nain present one hour before commencement of Examinations.
Pla	
D-	Cirreture of Condidate in municulate and
Da	Signature of Candidate in running hand
_	
	CERTIFIED BY THE HEAD OF INCTITUTION
	CERTIFIED BY THE HEAD OF INSTITUTION
Ιc	tify that,
ha	Shri/Smt/Kum. is a bonafide student of this college and satisfactorily attended the classes and
1.	that his/her attendance is not less than as prescribed by the University & respective council norms in lecture teaching and
	practical work, however, in case prescribed attendance is not fulfill up to commencement of examination, Hall ticket of the
2.	Candidate will be marked as "NOT ELIGIBLE" against the respective subject. that the candidate has completed the academic terms and appeared in mandatory number of internal assessment tests as per
	the university rules (wherever applicable).
3.	that he/she is not admitted to the course after the cut-off date for grant of terms. that the candidate has completed house job (For PG Only– wherever applicable)
4. <b>5.</b>	that the information furnished by the said candidate is verified from his/her documents and that the candidate
	is Eligible to appear for University Examination.
Pla	
ria	<del>a</del>
D	Cimpature 9 Cool of the Door / Bringing
Da	Signature & Seal of the Dean/Principal