KRISHNA INSTITUTE OF MEDICAL SCIENCES DEEMED UNIVERSITY, KARAD

Application form for PGS – AIET 2016

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Application Form No.

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Read all the instructions in the Brochure before completing the form.

2. 1. I	Write	in th	the	oxe car	s w	ith E	Blac e, a	k B	all Po	oint ears	Pen in l	in	Capi	tal L	ette	ers o	nly.	J	ica	te						
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2. Contact Telephone No. STD Code Telephone No.									Attested Recent Photograph of the Candidate taken																	
3. Mobile Number –										within last six months																
4. Date of Birth : DD / MM YY																										
Please mark the appropriate box with mark																										
5. Gender - Male Female										Left Thumb Impression																
6. I	Natior	nalit	y -	Indi	an				Fore	eign	er [
7. N	Л. С.I.	Re	gitr	atic	n -		Yes	s [No]	Regi	trat	on	No.										
8. 5	State I	М. С	C. R	legi	trat	ion	<u>- \</u>	es/] No	o [Reg	jistra	atio	n No	Э.									

9. MS Surgery or its equivalent marks	0. Final MBBS (III/II) marks							
Marks obtained out of	Marks obtained out of							
Month & Year of Passing Percentage of marks obtained No. of Attempts	Month & Year of Passing Percentage of marks obtained No. of Attempts							
11. Test Centre: Karad 12. D.D.of. Rs. 3000/- D.D. No. 14. Full Name and Complete Postal Address:	13. Date of Issue : / /2014							
	Pin Code :							
Signature of the Candidate								

Attested Xerox Copies of Mark sheet of MS Surgery or its equivalent are to be attached.

Declaration

I, hereby declare that the information given in this form is true and complete to the best of my knowledge. I am aware that if any information given herein is found to be incorrect or incomplete, my application will be rejected/ admission will be cancelled.

Signature of the candidate

I, the parent/guardian of the applicant, Mr./	/Miss
Here	by declare that I am aware of the financial
obligations of admitting my child/ward to	the Post-Graduate programme of Krishna
Institute of Medical Sciences Deemed Univers	sity, Karad. I agree to pay the tuition and other
fees payable to the University as fixed from til	me to time as per the rules. I also affirm and
endorse the declaration made above by my ch	ild/ward.
Place :	Signature of Parent/Guardian
Date:	
Father's/Guardian's Name	
For Offi	ce Use
1. Marks obtained at PGS - AIET 2016:	Out of 150, i.e%
2. Rank in the Merit List :	
3 Rank in subject wise merit list:	

KRISHNA INSTITUTE OF MEDICAL SCIENCES DEEMED UNIVERSITY, KARAD.

PGS - AIET- 2016 Entrance Test Admit Card

		Application Form No.	
		Unattested Recent Photograph of the Candidate taken within last six months	
Seat No. PGS – AIET - 2	2016		
Name of the Candidate	:		
Address & Telephone N	0		
			_
Entrance Test Date :	09/06/2016		
Entrance Test Time :	11.00 am to 1.30 pm		
Entrance Test Centre :	KIMS, Karad		