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| DATE OF ADMISSION |
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GOVERNMENT OF WEST BENGAL

OFFICE OF THE PRINCIPAL

MEDICAL COLLEGE, KOLKATA

**APPLICATION FORM FOR ADMISSION TO MBBS COURSE 20\_\_\_\_ - 20\_\_\_\_**

1.Name in full (**Capital** **Letter**) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2.Date of birth\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Gender \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Caste \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Religion \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_, Nationality \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. Permanent Residential Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mobile NO.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail ID \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. Local Address (if any) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6. Father’s/Mother’s name (with contact no)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

7. Guardian’s name and relationship with contact no (in case of father is not alive)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

8.Father’s Occupation and Annual Income \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

9.Name of the office where employed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

10. Source of maintenance/Financial Assistance for study \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

11. Received Scholarship or not, if yes source and amount \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

12. Curriculum Vitae prior to admission to MBBS

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| Subject taken and passed in 10+2 Exam (with marks)  1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ , 2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 4.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 5. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 6. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Total marks | Percentage |
|  |  |

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| Name of the Board in 10+2 | Year of passing | DETAILS OF PHYSICS+CHEMISTRY+BIOLOGY | | | Marks obtained in English | Max. Marks in ENG. | Percentage in ENG |
| Total Marks obtain in PCB | Max. Marks | Percentage |
|  |  |  |  |  |  |  |  |

13. Details of Entrance Examination (NEET):

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| NEET ROLL NO | TOTAL MARKS | MARKS OBTAINED | PERCENTAILE ( IN FULL) | RANK |
|  |  |  |  |  |

14. University Registration No. (if any, with name of the University) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

15. Whether Physically Handicapped as per NEET Guideline – YES/ NO\_\_\_\_\_\_\_\_\_\_ If yes – PH1/PH2\_\_\_\_\_\_\_\_\_\_\_\_\_\_

16. Whether medically fit for admission - YES/NO\_\_\_\_\_\_\_\_\_\_\_\_\_(Please attach the medical certificate)

17. Whether want to upgrade in subsequent round: YES / NO/N.A\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

18. Whether kept the scan copy of original documents: YES / NO\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I hereby certify that the above statements given by me are true. I have kept the scan copy of deposited original documents for future use.

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

(Signature of the applicant)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Signature of the Guardian)

I hereby agree to confirm to the rules and regulations at present in force or that may hereafter be made by the Govt. For colleges, and I undertake that so long as I am a student of the college will do nothing either inside or outside the college that will interfere with its Govt. And Discipline \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_