

ATAL BIHARI VAJPAYEE MEDICAL UNIVERSITY UTTAR PRADESH, LUCKNOW

	ENROLL	MENT FORM	Form N (ABVMU	o: UP Office)
COURSE NAME MD	S .(Course Code:) 1st	YEAR OF ADMISS	ION Batch	2023-24
Name of College:		Colleg	je Code [
Student Registration No. gi	ven by College:			Photograph Not less
ABVMUUP Enrollment No (Student ID No.)	Aice			than 3.5 cm x 4.00 cm Face Not less than 2 cm No Spectacles or Glass
*Example :- Do NOT Prefer Mr /Mrs / N 1. Name of Candidate [First Name of Candidate First Nam		English): (In CAPITALS) *	Do not write Mr/Ms	
2. Father's Name: [First Name, Mic	Idle Name, Last Name](In Englis	h): (In CAPITALS) * Do no	t write Mr/Shri	
3. Mother's Name: [First Name, Mi		_ sh): (In CAPITALS) * Do n o	ot write Mrs/Smt	
4. Gender: (Male/Female/Other) 5. Date of Birth (DD/MM/	YYYY) 6. Date of	Admission to ab	ove course (DD/MM/YYY)
	/ /		/ /	
7. Category (UR/OBC/SC/ST) 8	3. Religion	9	. Contact No (N	Mobile)
		+9	1	
10. Email ID (Please write very	clearly in CAPITAL letters	only)		
11. Permanent Address				
11. District	12. State		13. Pi	n Code
14. Aadhaar No	15.	Name of Selection E	 soard Qualifying	Exam (eq CET, etc)
16. Roll No of the Qualifying Examir	nation			
Date (DD/MM/YYYY):	_		(Sig	nature of the Student)

Certified that the Photograph, signature and student record have been checked by college and is correct



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Name of College: Examination Center: Examination Roll No ABVMUUP Enrollment No (Student ID No) ABVMUUP Enrollment No (Student ID No) Signature of the Stude Example: Do NOT Prefer Mr /Mrs / Miss I. Name of Candidate (First Name, Middle Name, Last Name)(In English): (In CAPITALS)* Do not write Mr/Shri Example: Father's Name: (First Name, Middle Name, Last Name)(In English): (In CAPITALS)* Do not write Mr/Shri (Is being permitted in the following Subjects) I. Basic Sciences Paper (Seal & Signature of the Princip												AI)MI	T (CAR	D					rial N BVMUI	l o: UP Off	ice)		
Examination Center: Examination Roll No ABVMUUP Enrollment No (Student ID No) Signature of the Student ID No) Signature of the Student ID No) Signature of the Student ID No Not Prefer Mr /Mrs / Miss I. Name of Candidate [First Name, Middle Name, Last Name](In English): (In CAPITALS)* Do not write Mr/Ms 2. Father's Name: [First Name, Middle Name, Last Name](In English): (In CAPITALS)* Do not write Mr/Shri (Is being permitted in the following Subjects) 1. Basic Sciences Paper (Seal & Signature of the Princip	C	DUR	SE	NAI	ИЕ		M). SC	Cou	rse (Cod	e:)	1st	YEA	R O	= AD	MIS	SIO	N	Bat	ch				
Examination Roll No ABVMUUP Enrollment No (Student ID No) Signature of the Stude Example: Do NOT Prefer Mr /Mrs / Miss Name of Candidate [First Name, Middle Name, Last Name](In English): (In CAPITALS) * Do not write Mr/Ms Father's Name: [First Name, Middle Name, Last Name](In English): (In CAPITALS) * Do not write Mr/Shri The Absolute of the Stude Example: Do Not Prefer Mr /Mrs / Miss (Is being permitted in the following Subjects) Basic Sciences Paper (Seal & Signature of the Princip	Va	ame	of (Colle	ege:												Coll	lege	Co	de					
ABVMUUP Enrollment No (Student ID No) Signature of the Studex In Capitals (In Capitals) * Do not write Mr/Ms L. Name of Candidate [First Name, Middle Name, Last Name](In English): (In CAPITALS) * Do not write Mr/Ms L. Father's Name: [First Name, Middle Name, Last Name](In English): (In CAPITALS) * Do not write Mr/Shri Mother's Name: [First Name, Middle Name, Last Name](In English): (In CAPITALS) * Do not write Mr/Smt (Is being permitted in the following Subjects) 1. Basic Sciences Paper (Seal & Signature of the Princip	Ξ>	ami	nati	ion	Cent	er: _														_					
Signature of the Studex Example: Do NOT Prefer Mr /Mrs / Miss Name of Candidate [First Name, Middle Name, Last Name](In English): (In CAPITALS)* Do not write Mr/Ms Face Not less than 2 cm No Speciacles or Glass Signature of the Studex Example: Do NOT Prefer Mr /Mrs / Miss Face Not less than 2 cm No Speciacles or Glass Signature of the Studex Example: Do NOT Prefer Mr /Mrs / Miss Face Not less than 2 cm No Speciacles or Glass Signature of the Studex Example: In CAPITALS)* Do not write Mr/Ms Face Not less than 2 cm No Speciacles or Glass Signature of the Studex Example: In CAPITALS)* Do not write Mr/Ms (In CAPITALS)* Do not write Mr/Smt (Is being permitted in the following Subjects) (Seal & Signature of the Princip	Ξx	amir	natio	on R	oll N	0																Ph th	nan 3.5	cm x	t less 4.00
Name of Candidate [First Name, Middle Name, Last Name](In English): (In CAPITALS) * Do not write Mr/Ms Father's Name: [First Name, Middle Name, Last Name](In English): (In CAPITALS) * Do not write Mr/Shri Mother's Name: [First Name, Middle Name, Last Name](In English): (In CAPITALS) * Do not write Mr/Shri (Is being permitted in the following Subjects) Basic Sciences Paper (Seal & Signature of the Princip					ollmo	ent N	0																ice No No Spe	t less t cm ectacle	
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instructions to Candidates

- 1. Candidates will be allowed to enter the examination hall on production of Admit Card.
- 2. No candidate will be allowed to enter the examination centre 30 minutes after the commencement of the examination. Candidate will be allowed to leave the examination hall only after 2 hours of the commencement of the examinations.
- 3. Candidates shall sign the attendance sheet when directed by invigilator(s).
- 4. Candidates shall not be allowed to carry any textural material printed or written matter or bits of paper or any other material except the admit card inside the examination hall. Papers, cellular phones, Bluetooth devices or any electronic scanning/transmission device are prohibited in the examination hail.
- 5. Candidates who indulge in any misdemeanor shall be deemed as misbehavior and the defaulting candidates shall forfeit the right to continue in the examination hall. The decision of the Chief invigilator shall be final.
- 6. No candidate should leave his/her seat in the examination hall without the permission of the invigilator until he/she finally submits the answer booklet to the invigilator.
- 7. Candidate shall not leave any identification mark anywhere in the answer book. if any candidate put's any type of identification mark on the answer book, then it will be considered as use of unfair means and suitable action will be taken as per rules.



ATAL BIHARI VAJPAYEE MEDICAL UNIVERSITY UTTAR PRADESH, LUCKNOW

EXAMINATION FORM

Form No: (ABVMUUP Office)

COURSE NAME	MDS .(Course Co	de:) 1st YEAR OF	ADMISSION Ba	atch			
Name of College:			College Code				
Examination Center:							
Examination Roll No			(Not t	o be filled by candidate)			
ABVMUUP Enrollment No (Student ID No.)							
Sir, It is requested to kindly allo 2023-24		e following subject o r Office Use)	f the university exa	mination for the year			
	•	,					
01. Basic Sciences Paper		ALLOWED/ NSU	FRESH PF	Colored Photograph Not less than 3.5 cm x 4.00 cm Face Not less than 2 cm No Spectacles or Glass			
Name of Candidate [First N	ame, Middle Name, Last Nai	me](In English): (In CAPIT/	ALS)* Do not write Mr/M	ls			
2. Father's Name: [First Name,	Middle Name, Last Name](I	n English): (In CAPITALS)	* Do not write Mr/Shri				
3. Mother's Name: [First Name	, Middle Name, Last Name](In English): (In CAPITALS) * Do not write Mrs/Smt				
Date (DD/MM/YYYY): Certified that the Photograph		t record have been che	·	ignature of the Student)			

Name of the Principal (Seal & Signature of the Principal)

The student is allowed to appear in the examination as indicated above.

(Counter Signature of Dean-ABVMUUP) (Medical/Dental/Nursing/Paramedical)