

## ATAL BIHARI VAJPAYEE MEDICAL UNIVERSITY UTTAR PRADESH, LUCKNOW

|   | ADMIT CARD                                       |   | Serial No:<br>(ABVMUUP Office)                  |  |
|---|--|---|---|--|
| COURSE NAME MO  | TT (Course Code: 200 ) 2 <sup>nd</sup> Ser       | nester Exam                             | Batch   |  |
|   | (M.Sc in Operation Theatr                        | e Technology)                           |   |  |
| Name of College:  |  | College Code                            | e   |  |
| Examination Center:   |  |   |   |  |
| Examination Roll No   |  |   | Photograph Not less<br>than 3.5 cm x 4.00<br>cm |  |
| ABVMUUP Enrollment No<br>(Student ID No.)   |  |   | Face Not less than 2 cm  No Spectacles or Glass |  |
| *Example :- Do NOT Prefer Mr /Mrs /  1. Name of Candidate [First Name of Candidate   First Name | Miss  le, Middle Name, Last Name](In English): ( | n CAPITALS ) * <b>Do not wri</b>        | Signature of the Student)                       |  |
| 2. Father's Name: [First Name, M  | ddle Name, Last Name](In English): ( In CA       | <br>.PITALS ) * <b>Do not write M</b> r | r/Shri  |  |
|   |  |   |   |  |
| 3. Mother's Name: [First Name, N  | liddle Name, Last Name](In English): ( In C      | APITALS ) * Do not write M              | Irs/Smt   |  |
|   |  |   |   |  |
|   | (Is being permitted in the fo                    | llowing Subjects)                       |   |  |
| Basic Medicine and Medical Biostatistics  | Ethics 2. Basic of Anesthesia 3                  | Basic of Surgery 4. R                   | Research Methodology and                        |  |
|   |  | ·                                       | Seal & Signature of the Principal)              |  |

## 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 hall.
- 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.



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## **EXAMINATION FORM**

Form No: (ABVMUUP Office)

|  | . WOTT (Course Code            | : 200) 2 <sup>nd</sup> Semeste | er Exam <b>Bato</b>              | ch 2023-24                             |
|--|--------------------------------|--------------------------------|----------------------------------|--|
|  | (M.Sc in Ope                   | ration Theatre Tech            | nnology)                         |  |
| lame of College:                                     |                                |                                | College Code                     |  |
| xamination Center:                                   |                                |                                |                                  |  |
| xamination Roll No                                   |                                |                                | (Not t                           | to be filled by candidate)             |
| BVMUUP Enrollment No<br>(Student ID No.)             |                                |                                |                                  |  |
| ir,  |                                |                                |                                  |  |
| is requested to kindly a<br>023-24                   | llow me to appear in the       | e following subject            | of the university exa            | mination for the yea                   |
|  | (Fo                            | r Office Use)                  |                                  |  |
| 01. Basic Medicine and Medical Ethics                |                                | ALLOWED/ NSU                   | FRESH PF                         |  |
| 02. Basic of Anesthesia                              |                                | ALLOWED/ NSU                   | FRESH PF                         | Colored Photograph<br>Not less         |
| 03. Basic of Surgery                                 |                                | ALLOWED/ NSU                   | FRESH PF                         | than 3.5 cm x 4.00 cm<br>Face Not less |
| 04. Research Methodology and Biostatistics           |                                | ALLOWED/ NSU                   | FRESH PF                         | than 2 cm<br>No Spectacles or<br>Glass |
| Example :- Do NOT Prefer Mr /I                       | Virs / Miss                    |                                |                                  |  |
| . Name of Candidate [First                           | Name, Middle Name, Last Nar    | me](In English): ( In CAPIT    | ΓALS )* <b>Do not write Mr/M</b> | ls                                     |
|  |                                |                                |                                  |  |
|  |                                |                                |                                  |  |
|  |                                |                                | \*B                              |  |
| Father's Name: [First Name                           | ne, Middle Name, Last Name](Iı | n English): ( In CAPITALS      | ) * Do not write Mr/Shri         |  |
| Father's Name: [First Name                           | ne, Middle Name, Last Name](Ii | n English): ( In CAPITALS      | ) ^ Do not write Mr/Shri         |  |
| Father's Name: [First Nan  Mother's Name: [First Nan |                                |                                |                                  |  |

Certified that the Photograph, signature and student record have been checked by college and is correct The student is allowed to appear in the examination as indicated above.