

ATAL BIHARI VAJPAYEE MEDICAL UNIVERSITY UTTAR PRADESH, LUCKNOW

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Instructions to Candidates

(Seal & Signature of the Principal)

- 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)

EXAMINATION OF	•	se Code:)Re n Physiology)	gular Exam Ba	atch 2021-2022
Name of College:			College Code	
Examination Center:				
Examination Roll No			(Not to	o be filled by candidate)
ABVMUUP Enrollment No (Student ID No.)				
Sir, It is requested to kindly allow 2021-22		llowing subject o	f the university exa	mination for the year
 01. General and Cellular Physiolog 02. Systemic Physiology (system price) 03. Systemic Physiology (system controlled) 04. Applied Physiology including reinstruction *Example :- Do NOT Prefer Mr /Min 1. Name of Candidate [First Name 	roviding transport, nutrition oncerned with procreation, cent advances	ALLOWED/ NSU ALLOWED/ NSU	FRESH PF FRESH PF FRESH PF	Colored Photograph Not less than 3.5 cm x 4.00 cm Face Not less than 2 cm No Spectacles or Glass
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2. Father's Name: [First Name, Mid	ddle Name, Last Name](In Eng	glish): (In CAPITALS)	* Do not write Mr/Shri	
3. Mother's Name: [First Name, Mid	ddle Name, Last Name] (In Er	nglish): (In CAPITALS) * Do not write Mrs /Smt	:
Date (DD/MM/YYYY): Certified that the Photograph, sign		ord have been che		ature 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)



ATAL BIHARI VAJPAYEE MEDICAL UNIVERSITY UTTAR PRADESH, LUCKNOW

(MD In Physiology) Name of College: Student Registration No. given by College: If Applicable) ABVMUUP Enrollment No (Student ID No.) (Student ID No.) (MD In Physiology) Photograthan 3.5 Face Not No Spe	(ABVMUUP Office)					
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1. District 12. State 13. Pin Code						
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4. Aadhaar No 15. Name of Selection Board Qualifying Exam (eg Cl	ET, etc)					
6. Roll No of the Qualifying Examination						
Pate (DD/MM/YYYY): (Signature of the	e Studei					

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

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

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