



RUXMANIBEN DEEPCHAND GARDI MEDICAL COLLEGE

AGAR ROAD, SURASA, UJJAIN - 456 006

NOTE - To be filled in BLOCK CAPITAL. Handwriting only. Tick appropriate boxes. PLEASE READ THE INSTRUCTIONS GIVEN IN THE BROCHURE BEFORE FILLING IN THE FORM IF NOT FILLED, AS PRESCRIBED, THE FORM WILL NOT BE ACCEPTED

M.B.B.S. COURSE NRI SEATS

Do not staple or pin the photograph, paste it

Candidate's Name (As given in class 10th Certificate)

Grid for Candidate's Name

Father's/Guardian's Name

Grid for Father's/Guardian's Name

Address for Communication (See inst. No. 6.10)

Grid for Address for Communication

Tel. No. [Grid]

E-Mail

Fax No. [Grid]

Mobile [Grid]

Date of Birth [Grid] [Grid] [Grid] (Date) (Month) (Year)

Sex [] [] (Male) (Female)

Year of Passing

SSC/10th Std [Grid] HSC/10+2/12th Std [Grid] Appearing []

Subjects Offered in 12th/HSC English [] Physics [] Chemistry [] Biology [] or (Botany and Zoology) []

Details of Demand Draft

D.D. No. [Grid] Amount (in Rs.) [Grid] Date of Issue [Grid] [Grid] [Grid] Date Month Year

Name of the Bank

Grid for Name of the Bank

Name of the school/college from which the candidate has passed/ appeared for HSC/ 12th Std. Exam along with its full address(Place, District, State, Country)

Grid for Name of the school/college

District [Grid]

State [Grid]

Country [Grid]

Signature of the Candidate

