Himachal Pradesh University ('A' Grade University Accredited by NAAC) Gyanpath, Summer Hill, Shimla-171005

	Roll No	
	(To be assigned by	the office)
Application form for the appearing in MD/MS/MDS		
Examination to be held in20		
Subject in which appearing	examination.	

LAST DATE FOR RECEIPT OF FORM AND FEE: WITHOUT LATE FEE UPTO

- Examination Admission fee for MD/MS/MDS Regular 6000/- Reappear Rs. i) 1000/-P.P
- With a late fee of Rs. 20000/- in very special circumstances with the due ii) permission of Hon'ble Vice-Chancellor.

Particular to be filled in by the student neatly and legibly in his / her own handwriting.

- 1. Name (Block Letters in English)_____ (In Hindi)______ write as per registration card issued by the University.
- 2. Father's Name (Block Letters in English)_____ (In Hindi)________write as per registration card issued by the University.
- 3. Date of Birth
- 4. Registration number as per registration card issue by the university_____
- 5. Do you belong to Schedule Tribe/ Schedule caste/ Backward Class/Write one specific category(if apply)_ _____
- 6. Name of the state which you belongs_____
- 7. Permanent Home Address_____
- 8. Domicile (for domicile write name of the state)_____

9. Year of passing the previous professional examination_____

Month	Year	Roll No
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10. Name of college where you are studying_____

11. Subject in which appearing:

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12. Subject in which permitted to re-appear:

13. For candidate who failed under rules:	but permitted to r	e-appear in the subject under examination
For first time year	Month	Roll No
For Second time year	Month	Roll No
For Third time year	Month	Roll No
14. For failed candidates, yes	s in which appeare	ed for the first time
Month	Roll No	
		the university from appearing in any
examination? If so give period	for which disqual	ified.
	ŌR	
In any case of unfair means is	pending against y	ou? If so, give name of the
examination	Yearand S	SessionRoll
No(Name of	of the University E	Board in which the case in pending)
	-	ank Draft/Cheque No

I hereby solemnly declare that the particular as filled in this form as above are true and correct to the best of my knowledge and belief, if any particular is found false, I shall be solely responsible for the consequences what so ever.

Signature of the Candidate.

Dated:

Certificate

I, hereby certify that the particulars as filled by the student in this form have been verified as per record of the college, which are found as correct. I further certify that the aforesaid student has fulfilled the minimum requirement the condition of the attendance/ lectures as per H.P University Ordinances and as such he/she is eligible to appear in the examination to be held in ______ this form has been filled up by the student himself/herself he/she bears good moral character.

PRINCIPAL (Signature with seal)



Himachal Pradesh University Gyanpath, Summer Hill, Shimla-171005 ('A' Grade University Accredited by NAAC)

Roll No._____

Affix one of the

Photograph

Dully attested.

(To be assigned by the office)

Provisional

(To be filled by the candidate)

Signature of Candidate		Controller of Examination
date sheet and at centre of Examination		
Examination to be held in	20	on the dates as given in the
To the MD/MS/MDS		
Son/Daughter of Shri		
Admit (Name of the candidate)		

Controller of Examinations, Himachal Pradesh University.