

INSTRUCTIONS

1. Read all the instructions in the Brochure before Filling up this form.
2. Write with **BLACK** ball point pen in boxes using English capital letters or English numerals without touching the Outline of the box.
3. Do not make any stray marks on this sheet.
4. Do not staple, pin, wrinkle, scribble, tear, wet or fold this sheet.
5. Shade the appropriate circles like his I Not like this

PHOTOGRAPH

paste a 3.5 cm x 4.5 cm
size Colour Photograph
only.

1. Name of the Candidate (Write within the boxes)

Surname	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Mother's Name

Father's Name

2. Contact Telephone Number

STD Code -

Telephone Number -

Mobile Number -

3. Date of Birth

DATE	MONTH	YEAR
<input style="width: 20px;" type="text"/> - <input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/> - <input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/> - <input style="width: 20px;" type="text"/>

4. Category:- Open/SEBC/SC/ST

5. Name & Address of the Institute at HSC (or equivalent)

PIN :

6. Percentile of marks obtained at HSC (or equivalent)

. %

7. Percentage of Marks in PCB

Physics	Chemistry	Biology	Total	%
<input style="width: 100%; height: 100%;" type="text"/>	<input style="width: 100%; height: 100%;" type="text"/>	<input style="width: 100%; height: 100%;" type="text"/>	<input style="width: 100%; height: 100%;" type="text"/>	<input style="width: 100%; height: 100%;" type="text"/>

Tick out the appropriate sign (\checkmark), (X) in the box

8. Sex

<input type="checkbox"/>	Male
<input type="checkbox"/>	Female

9. Nationality

<input type="checkbox"/>	Indian
<input type="checkbox"/>	Foreigner

NEET Roll No:-

Neet Marks:-

Tick out the appropriate sign (\checkmark), (X) in the box

11. HSC (or equivalent) passed / appeared from School/Jr.college

<input type="checkbox"/>	In Gujarat
<input type="checkbox"/>	Outside Gujarat

12. Candidate's Name & Complete Address

PIN

Signature of Candidates
(Within the BOX only)

Declarations by the candidate:

1. I hereby solemnly and sincerely affirm that the statements made and information given by me in the application form is true and correct.
2. I have not concealed any material information, however if any information submitted herein is fraudulent, incorrect, or untrue, I understand that I am liable to criminal prosecution and I also agree to forgo my seat in Dental college. Further that the selection and admission to the course is liable to be cancelled.
3. I agree to abide by the Rules and Regulations as contained in the Information Brochure.
4. At present I am not a student of Health Science course anywhere in Gujarat.
5. I undertake to submit all the required certificates at the time of my selection during admission Process as per the rules, failing which my claim for selection shall not be granted.

Date :

Place :

Signature Of the Candidates

Declaration by the Parent / Guardian

I have fully read the information furnished by my son / daughter / ward and affirm that it is true and if it is proved that the information is fraudulent, I am liable for criminal prosecution.

Date :

Place :

Signature Of Father / Mother / Guardian

(FOR OFFICE USE ONLY)