

## ATAL BIHARI VAJPAYEE MEDICAL UNIVERSITY UTTAR PRADESH, LUCKNOW

COURSE NAME  Name of College:  Examination Center:	•	Course Code: 208) ical Laboratory Scie	ences For Pathology	
<u> </u>	(Master in Med	ical Laboratory Scie	3.	)
<u> </u>				
Examination Center:			College Code	
Examination Roll No				Photograph Not less than 3.5 cm x 4.00
ABVMUUP Enrollment No (Student ID No.)				Face Not less than 2 cm No Spectacles or Glass
. Name of Candidate [First Nar	me, Middle Name, La	ast Name](In English	): ( In CAPITALS ) *	Do not write Mr/Ms
Father's Name: [First Name, I	Middle Name, Last N	Jamal (In English): ( I	In CADITALS ) * Do	not write Mr/Shri
Fauler 8 Name. [First Name, 1	Wilddie Ivaille, Last I	vamej(in English). ( i		not write Mil/Silli
3. Mother's Name: [First Name,	Middle Name, Last	Name](In English): (	In CAPITALS ) * <b>D</b>	o not write Mrs/Smt
		ermitted in the follo		d Histopathology
. Applied Histopathology 2 App	, , , ,		,	(Seal & Signature of the Principa

- 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

	EXA	AMINATION FORM		Form No: (ABVMUUP Office)
EXAMINATION OF	•			Batch
	(Master in Medical	Laboratory Sciences	For Pathology)	
Name of College:			College Code	
Examination Center:				
Examination Roll No				(Not to be filled by candidate)
ABVMUUP Enrollment No (Student ID No.)				
Sir,				
It is requested to kindly allow me	to appear in the follo	owing subject of the u	niversity examin	ation for the year 2022-23
	(For Office Us	se)		
<b>01.</b> Applied Histopathology		ALLOWED/ NSU	FRESH PF	]
<b>02.</b> Applied Cytopathology		ALLOWED/ NSU	FRESH PF	Colored Photograph Not less
		ALLOWED/ NSU	FRESH PF	than 3.5 cm x 4.00 cm Face Not less
<ul><li><b>03.</b> Applied Immunopathology</li><li><b>04.</b> Advanced Histopathology</li></ul>		ALLOWED/ NSU	FRESH PF	than 2 cm No Spectacles or
*Example :- Do NOT Prefer Mr	/Mrs / Miss			Glass
1. Name of Candidate [First Name	e, Middle Name, Last N	Name](In English): ( In	CAPITALS)*I	Oo not write Mr/Ms
2. Father's Name: [First Name, M	iddle Name I ast Nam	el(In Fnglish): ( In CA	PITALS) * Do n	ot write Mr/Shri
2. Tamer S Traine. [1 list Traine, 17]	Iddie Ivanie, East Ivani	Ej(III Eligiisii). ( III C7		
3. Mother's Name: [First Name, N	Aiddle Name, Last Nar	ne](In English): (In Ca	APITALS) * Do	not write Mrs/Smt
<b>Date</b> (DD/MM/YYYY):		rd have been checked l	by college and is	(Signature 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)