

ATAL BIHARI VAJPAYEE MEDICAL UNIVERSITY UTTAR PRADESH, LUCKNOW

ADMIT CARD

Serial No: (ABVMUUP Office)

COURSE NAME	BSCN (Course Code: 001) 1 st Semeste	эr Exam (үүүү) 20
Name of College:	College Co	de
Examination Center:		
Examination Roll No		Photograph Not less than 3.5 cm x 4.00 cm
ABVMUUP Enrollment No (Student ID No.)		Face Not less than 2 cm No Spectacles or Glass

Signature of the Student)

1. Name of Candidate [First Name, Middle Name, Last Name](In English): (In CAPITALS) * Do not write Mr/Ms

2.	2. Father's Name: [First Name, Middle Name, Last Name](In English): (In CAPITALS) * Do not write Mr/Shri																			
3.	3. Mother's Name: [First Name, Middle Name, Last Name](In English): (In CAPITALS) * Do not write Mrs/Smt																			

(Is being permitted in the following Subjects)

1. Applied Anatomy & Applied Physiology 2. Applied Sociology & Applied Psychology

(Seal & Signature of the Principal)

Instructions to Candidates

- 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 hall.
- 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	BSCN (Code: 001)) 1 st Semester Exam	OF 2020
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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 appe 2021-22	ar in the following subject of	the university examination for the year
	(For Office Use)	
01. Applied Anatomy & Applied Physiology	ALLOWED/ NSU FRESH	PF
02. Applied Sociology & Applied Psycholog	ALLOWED/ NSU FRESH	PF Colored Photograph
03	ALLOWED/ NSU FRESH	PF Not less than 3.5 cm x 4.00 cm
04	ALLOWED/ NSU FRESH	PF Face Not less than 2 cm
05	ALLOWED/ NSU FRESH	PF No Spectacles or Glass
06	ALLOWED/ NSU FRESH	PF Glass
1. Name of Candidate [First Name, Middle Name	e, Last Name](In English): (In CAPITAI	_S)* Do not write Mr/Ms
2. Father's Name: [First Name, Middle Name, Las	st Name](In English):(In CAPITALS)*	Do not write Mr/Shri
3. Mother's Name: [First Name, Middle Name, La	st Name](In English):(In CAPITALS)	* Do not write Mrs/Smt
Date (DD/MM/YYYY):		(Signature of the Student)

<u>Certified that the Photograph, signature and student record have been checked by college and is correct</u> <u>The student is allowed to appear in the examination as indicated above.</u>

(Seal & Signature of the Principal)

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



ATAL BIHARI VAJPAYEE MEDICAL UNIVERSITY UTTAR PRADESH, LUCKNOW

ENROLLMENT FORM

Form No: (ABVMUUP Office)

COURSE NAMEB.S.C.N C						Cou	rse	Cod		YE	AR	OF	(YY) 20 - 20														
Name of College:									College Code																		
	Student Registration No. given by College:									:											Photograph Not less than 3.5 cm x 4.00						
ABVMUUP Enrollment No (Student ID No.)																						F	cm Face Not less than 2 cm No Spectacles or Glass				
1.	Nar	ne o	f Ca	ndid	ate [F	First N	ame, N	/liddle	Name	e, Last	Nam	e](In E	Inglish	n): (Ir	n CA	PITA	ALS) * Do	o not	write	e Mr/	Ms				<u> </u>	
2.	Fath	ner's	Nan	ne: [F	First Na	ame, N	/iddle	Name	, Last	Name] e](In E	nglish): (In	CAPI	ITAL	S)*	Do	not w	vrite I	Mr/Sł	nri						
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э.	IVIOL		i nar	ne. [i		lame,	Middle	Name	e, Lasi	(Name		ngiisi	n): (In			.5)"	" Do	not	write	IVITS/3	Smt						
4.	Ger	nder:	(Ma	le/Fe	male	e/Oth	er) 5	. Da	ate of	^f Birth	םם) ו	/MM/`	(YYY)		6	5. Da	ate	of A	.dmi	ssio	n to	o abo	ove	coui	rse (DD/N	1M/YYY
7.	Cate	egory	' (UR/	OBC/	SC/ST	-)	8.	Relig	ion									9.	Со	ntac	t N	o (M	lobil	e)			
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10	. Em	ail ID	D (P	lease	e writ	e ver	y clea	arly ir	n CA	PITA	L let	ters	only)		•							1			4		<u> </u>
11	. Per	rman	ent /	Addre	ess																						
11	. Dis	trict								12.	. St	ate									13.	Pir	ר Co	de			
14	. Aa	dhaa	r No									15.	Nar	ne o	of Se	elec	tior	n Bo	ard	Qua	alifyi	ing E	Exar	n (e	g CE⁻	Γ, etc)
16	. Roll	No c	of the	Qual	ifying	Exan	ninatio	on																			
Da	ate (D	DD/MN	<i>I</i> /YYY	(Y): _																	(Sigr	natui	re of	f the	Stu	dent)

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