

## ATAL BIHARI VAJPAYEE MEDICAL UNIVERSITY UTTAR PRADESH, LUCKNOW

	-	(ABVMUUP Office)
COURSE NAME	M.M.L.P (Course Code: 208) 3 <sup>nd</sup> Semester Ex	am <b>Batch</b>
	(Master in Medical Laboratory Sciences For Patholog	gy)
Name of College:	College Cod	e
Examination Center:		
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
*Example :- Do NOT Prefer Mr	r /Mrs / Miss	Signature of the Studen
-	r /Mrs / Miss ne, Middle Name, Last Name](In English): (In CAPITALS)	-
1. Name of Candidate [First Nam	ne, Middle Name, Last Name](In English): (In CAPITALS)	) * Do not write Mr/Ms
1. Name of Candidate [First Nam		) * Do not write Mr/Ms
1. Name of Candidate [First Name of Candidate   First Name of Candidat	ne, Middle Name, Last Name](In English): (In CAPITALS)	Do not write Mr/Shri
1. Name of Candidate [First Name of Candidate   First Name of Candidat	ne, Middle Name, Last Name](In English): ( In CAPITALS )  Middle Name, Last Name](In English): ( In CAPITALS ) * I	) * Do not write Mr/Ms  Do not write Mr/Shri
1. Name of Candidate [First Name of Candidate   First Name of Candidat	ne, Middle Name, Last Name](In English): ( In CAPITALS )  Middle Name, Last Name](In English): ( In CAPITALS ) * I	) * Do not write Mr/Ms  Do not write Mr/Shri
1. Name of Candidate [First Name]  2. Father's Name: [First Name, Name]  3. Mother's Name: [First Name, Name]	ne, Middle Name, Last Name](In English): (In CAPITALS)  Middle Name, Last Name](In English): (In CAPITALS) * I  Middle Name, Last Name](In English): (In CAPITALS) *	) * Do not write Mr/Ms  Do not write Mr/Shri  Do not write Mrs/Smt
1. Name of Candidate [First Name]  2. Father's Name: [First Name, Name]  3. Mother's Name: [First Name, Name]	ne, Middle Name, Last Name](In English): (In CAPITALS)  Middle Name, Last Name](In English): (In CAPITALS) * I  Middle Name, Last Name](In English): (In CAPITALS) *  (Is being permitted in the following Subjects)	) * Do not write Mr/Ms  Do not write Mr/Shri  Do not write Mrs/Smt

- 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 OF	nd Camandan E	(	ABVMUU	P Office)			
			Ba	tch	•••••	•••••	
	ences For Path	ology)					
Name of College:	Colleg	e Code					
Examination Center:					-		
Examination Roll No			(Not to b	e filled	oy can	didate)	
ABVMUUP Enrollment No (Student ID No.)							
Sir,							
It is requested to kindly allow me to appear in the following subject o	f the university	examina	tion for	the year	2021-	22	
(For Office Use)			Г				
01. Applied Histopathology	NSU FRESI	l PF					
02. Applied Cytopathology	ISU FRESI	FRESH PF		Colored Photograph Not less			
ALLOWED/I	ISU FRESI	l PF		than 3.5	cm x 4.		
<ul><li>03. Applied Immunopathology</li><li>04. Advanced Histopathology</li><li>ALLOWED/I</li></ul>	ALLOWED/ NSU FRESH PI			Face Not less than 2 cm No Spectacles or			
*Example :- Do NOT Prefer Mr /Mrs / Miss	IN AL CADITA	1 (2 ) <b>* P</b>			3lass		
4 N CC 21 CE N N 11 N 1 N 17 E 1	h ) · / In / `/\ DI I /	LS)*DO	not wr	ite Mr/N			
1. Name of Candidate [First Name, Middle Name, Last Name](In Englis	II). ( III CAFII F				18	1 1	
1. Name of Candidate [First Name, Middle Name, Last Name](In Englis	ii). ( III CAI II F				18		
		) * <b>Do no</b>	t write N	Mr/Shri			
Name of Candidate [First Name, Middle Name, Last Name](In Englis		) * <b>Do no</b>	t write N	Ar/Shri			
	In CAPITALS						

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)