

## ATAL BIHARI VAJPAYEE MEDICAL UNIVERSITY UTTAR PRADESH, LUCKNOW

	ADMIT CARD	Serial No: (ABVMUUP Office)
COURSE NAMEMN	MRIT (Course Code: 210 ) 2 <sup>st</sup> Semester Exam	n <b>Batch(</b> YYYY) 20
(Maste	r in Medical Radiology and Imaging Tech	nnology)
Name of College:	College (	Code
Examination Center:		
ABVMUUP Enrollment No (Student ID No.)		Photograph Not less than 3.5 cm x 4.00 cm Face Not less than 2 cm No Spectacles or Glass
	_	Signature of the Stude
•		ot write Mr/Ms
*Example :- Do NOT Prefer Mr /Mrs / Mis  1. Name of Candidate [First Name, N	s /liddle Name, Last Name](In English): ( In CAPITALS ) * <b>Do n</b>	ot write Mr/Ms
Name of Candidate [First Name, Name, Name]	//iddle Name, Last Name](In English): (In CAPITALS) * <b>Do n</b>	
1. Name of Candidate [First Name, N		
1. Name of Candidate [First Name, Name, Name]  2. Father's Name: [First Name, Middle	//iddle Name, Last Name](In English): (In CAPITALS) * <b>Do n</b>	rite Mr/Shri

#### **Instructions to Candidates**

(Seal & Signature of the Principal)

- 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).

Imaging Procedure 4.Research Methodology and Biostatics-II

- 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

#### **EXAMINATION FORM**

Form No: (ABVMUUP Office)

EXAMINATION OF MM (Mas	IRIT (Course Code: 210 ster in Medical Radiolo			ch(YYYY) 20	
lame of College:		C	college Code		
examination Center:					
xamination Roll No			(Not to	be filled by candidate)	
ABVMUUP Enrollment No (Student ID No.)					
ir,					
is requested to kindly allow 021-22	• •		university exar	nination for the yea	
	(For Office Use)  ALLOWED NSU FRESH PF			Colored Photograph	
ALLOWEDIN			FRESH PF	Not less than 3.5 cm x 4.00 cm	
Modern Radiological and Imaging Equipment     ALLOWED(NS)			FRESH PF	Face Not less	
<ol> <li>Radiological and Imaging I</li> <li>Research Methodology ar</li> </ol>		ALLOWED/ NSU	FRESH PF No Spectacles or Glass		
*Example :- Do NOT Prefer Mr / Name of Candidate [First Name		nglish): ( In CAPITALS )	* Do not write Mr/Ms	3	
Father's Name: [First Name, Mic	ddle Name, Last Name](In English	n): ( In CAPITALS ) * <b>Do</b>	not write Mr/Shri		
Mother's Name: [First Name, Mi	ddle Name, Last Namel(In Englis	h): ( In CAPITALS ) * <b>Do</b>	not write Mrs/Smt		
Pate (DD/MM/YYYY):	_		(Się	gnature of the Student	

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



# ATAL BIHARI VAJPAYEE MEDICAL UNIVERSITY UTTAR PRADESH, LUCKNOW

	ENROLLI	Form No: (ABVMUUP Office)			
OURSE NAME MMRIT (Course Code: 210 ) 2st Semester Exam			Batch(YYYY) 20		
(1	Master in Medical Radiolo	ogy and Imaging Technol	logy)		
lame of College:		College Code			
Student Registration No. of Applicable)	given by College:		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 /N					
Name of Candidate [First Na	ame, Middle Name, Last Name](In English):	( In CAPITALS ) * Do not write Mr/Ms			
Father's Name: (First Name N	// // // // // // // // // // // // //	ADITALS ) * Do not write Mr/Shri			
Tatrici 3 Name, i	iliddie Name, Last Namej(ili English). ( ili C/	AFITALS) DO NOT WITE WITSHIT			
Mother's Name: [First Name, N	 Middle Name, Last Name](In English): ( In C	CAPITALS ) * Do not write Mrs/Smt			
	er) 5. Date of Birth (DD/MM/YYYY)  8. Religion	6. Date of Admission to about 10 pt			
		+91			
O. Email ID ( Please write ver	y clearly in CAPITAL letters only)				
	,,,,,, .				
1.5					
Permanent Address					
1. District	12. State	13. P	in Code		
4. Aadhaar No	15	Name of Selection Board Qualit	fring Evom ( CET)		
4. Adulidai No		Name of Selection Board Quality	ying Exam (eg CET, etc)		
6. Roll No of the Qualifying Exam	ination				
Date (DD/MM/YYYY):		(Sian:	ature of the Student)		

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

Name of the Principal
(Seal & Signature of the Principal)

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