

ATAL BIHARI VAJPAYEE MEDICAL UNIVERSITY UTTAR PRADESH, LUCKNOW

	ADMIT CARD									
COURSE NAME	P.G Diploma D.A (Course Code:) Regular Exam	Batch 2021-2022							
	(Diploma in Anesthesia I	D.A)								
Name of College:		College Code								
Examination Center:										
Examination Roll No ABVMUUP Enrollment No			Photograph Not less than 3.5 cm x 4.00 cm Face Not less than 2							
(Student ID No.)			No Spectacles or Glass							
*Example :- Do NOT Prefer Mr /Mrs / Miss										
1. Name of Candidate [First Name	, Middle Name, Last Name](In English): (Ir	n CAPITALS) * Do no t	t write Mr/Ms							
2. Father's Name: [First Name, Mi	_ _ _ _ _ ddle Name, Last Name](In English): (In CA		ite Mr/Shri							
3. Mother's Name: [First Name, M	ddle Name, Last Name](In English): (In CA	APITALS) * Do not wr	ite Mrs/Smt							
(Is being permitted in the following Subjects)										
1. Basic Sciences as Applied to Anesthesiology 2. Practice of Anesthesia: Aesthesia in relation to Associated Systemic and Medical										
Diseases 3. Anesthesia in relation to Subspecialties / Super Specialties										
		(Se	al & 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 OFP.G Diploma D.A (Course Code:) Regular Exam Batch 2021-2022 (Diploma in Anesthesia D.A)																						
Na	ame of	College:												Со	lleg	e Co	ode					
Ex	kaminat	tion Cen	ter: _																			
Examination Roll No												(Not	Not to be filled by candidate)									
ABVMUUP Enrollment No (Student ID No.)																						
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3.	Mother'	s Name: [First N	ame, I	Middle	Name	e, Last	t Nam	e](In E	nglish	n): (In	CAPI	TALS)	* Do	not w	rite N	Mrs/Sm	ıt	1	1		
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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)



ATAL BIHARI VAJPAYEE MEDICAL UNIVERSITY UTTAR PRADESH, LUCKNOW

	ENROLLMENT FOR	RM Form (ABV	n No: MUUP Office)					
COURSE NAME P.G Di	`) Regular Exam	Batch 2021-2022					
	(Diploma in Anesthesia I	•						
Name of College:		College Code						
Student Registration No. given by (If Applicable)	/ College:		Photograph Not less than 3.5 cm x 4.00					
ABVMUUP Enrollment No (Student ID No.)			cm Face Not less than 2 cm					
			No Spectacles or Glass					
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Name of Candidate [First Name, Middle]	e Name, Last Name](In English): (In CAF	PITALS) * Do not write Mr/N	V Is					
2. Father's Name: [First Name, Middle Nam	e, Last Name](In English): (In CAPITALS	3) * Do not write Mr/Shri						
3. Mother's Name: [First Name, Middle Nam	ne, Last Name](In English): (In CAPITAL	S) * Do not write Mrs/Smt						
4. Gender: (Male/Female/Other) 5. D	ate of Birth (DD/MM/YYYY) 6.	. Date of Admission to	above course (DD/MM/YYY)					
	/ / /		/					
7. Category (UR/OBC/SC/ST) 8. Relig	gion	9. Contact No	(Mobile)					
		+91						
10. Email ID (Please write very clearly	in CAPITAL letters only)							
11. Permanent Address								
11. District	12. State	13.	Pin Code					
14. Aadhaar No	15. Name of Se	lection Board Qualifyir	ng Exam (eg CET, etc)					
16. Roll No of the Qualifying Examination								
Date (DD/MM/YYYY):		?)	Signature of the Student)					

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