

43-5000-04-2016

Rs. 25/- (Twenty Five Rupees) only Final M.B.,B.S. Part-I (Whole/Part)

Abbreviated name of the College

(To be entered by the College Office) \_\_\_\_\_

**GUJARAT UNIVERSITY**

FINAL M.B.,B.S. PART-I EXAMINATION—January/July, 20 .

(Admission Fee : Rs. 1000 including Mark-Statement Fee)

*N.B.— Forms submitted after the prescribed date will not be accepted. Please fill in all details neatly. Incomplete form will be rejected.*

To

The Registrar,  
Gujarat University, Ahmedabad-380 009.

I request permission to present myself at the ensuing Final M.B.,B.S. Part-I Examination for the Degree of M.B.,B.S. at the Ahmedabad Centre and herewith Rs. 1000 as fees (included M.S. fees).

• I request exemption from the following subject/subjects as I have obtained percentage of marks entitling me to exemption in those subjects in accordance with Ordinance and Regulations of the university at the examinations held in the months and years mentioned against them.

Subjects	Month & Year	Seat No.	Name of the University
1. ....	.....	.....	.....
2. ....	.....	.....	.....

Yours faithfully,

Place : .....

Date : .....20 . (Signature of Candidate).....

Personal Details				Col. Nos.	To be filled in by the College	
Surname		Name	Father's/Husband's Name			
Name in full in <b>block letters</b> (Beginning with Surname)				9	Sr. No. of Applicant	
Grand Father's Name.....				13	College Code	
Race & Religion..... Male or Female.....				15		
I wish to appear in ..... Course (New)				16	Centre	<b>01</b>
I wish to appear in ..... Medium (1-Gujarati, 2-Hindi, 3-English)				17	Code	
SC or ST or SEBC or Open.....					Medium	
College.....					1-Guj., 2-Hindi, 3-English	
Fresh Student or Repeater student.....					Appearing in	
				18	( i ) Whole	
					( ii ) Part	
Examination Particulars						
Name of Examination	Month & Year	Seat No.	Name of University/Board			
H.S.C. or Equivalent Exam.				26	Sex	
First M.B.,B.S. Exam.						
Second M.B.,B.S. Exam.						
Final M.B.,B.S. Part-I (for only Repeater)						
Date of joining the I M.B.,B.S. Course.....				72	E.N.T.	
Eligibility Certificate No. (if applicable) ..... Date.....				76	Ophthalmology	
Residential address.....				78		
.....Tele. No.....				80	Community	
Permanent address.....				81	Medicine	
.....Tele. No.....				84		

**Write Ex. against the subject where exemption is claimed**

[P.T.O.]

**FOR FRESH CANDIDATES**

I certify that Shri/Smt./Kumari.....  
is a student of..... College..... and he/she is eligible to appear in  
university examination as per Ordinance and Regulation of Gujarat University.

Place :..... (Signature).....

Date :..... (Seal)  
Dean..... College.....

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**FOR REPEATER CANDIDATES**

I certify that Shri / Smt./Kumari.....  
of..... College..... failed to pass in..... Examination  
held in February/August, 20 .

I also certify that his/her statement as to his/her having obtained at a previous examination marks sufficient  
to entitle him/her exemption from the subject/subjects, in accordance with Ordinance and Regulation of Gujarat  
University is correct.

Place :..... (Signature).....

Date :..... (Seal)  
Dean, ..... College.....

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• To be struck off where it is not applicable.

*Note* : It is essential to attach certified Xerox Copies of :

- (1) All mark-sheets of H.S.C. or equivalent exam, First M.B.,B.S. exam, Second M.B.,B.S. Exam. and Final M.B.,B.S. Part I Exam.
- (2) Eligibility Certificate if applicable.