

GUJARAT UNIVERSITY**FIRST B.PHYSIOTHERAPY EXAMINATION—February/August, 20 .****(Examination Fee : Rs. 1200 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 First Examination for the Degree of B.Physiotherapy at the Ahmedabad Centre and herewith Rs. 1200 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.
3.
4.

Yours faithfully,

Place :

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

Personal Details				Col. Nos.	To be filled in by the College	
Name in full in block letters (Beginning with Surname)				9	Sr. No. of Applicant	
Surname	Name	Father's / Husband's Name		-12		
Race & Religion..... Male or Female.....				13	College Code	
SC or ST or SEBC or Open.....				-15		
Birth Date.....				16	Centre Code	
College.....				-17		
Fresh Student or Repeater student.....				18	Appearing in (i) Whole (ii) Part	
				26	Sex	
					Course (New)	
Examination Particulars				Write Ex. against the subject where exemption is claimed		
Name of Examination	Month & Year	Seat No.	Name of University/Board			
H.S.C. or equivalent examination				72	Human Anatomy	
First B.Physiotherapy exam. (for only Repeater)				74	Human Physiology / Biochemistry	
Date of joining the First B.Physiotherapy Course.....				76	Psychology & Sociology	
Residential address.....				78	Fundamentals of Bio-Medical Physics	
.....Tele. No.....						
Permanent address.....				80	Exercise Therapy-I & Massage Manipulation	
.....Tele. No.....						

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 & Concern Council/Board.

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

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

FOR REPEATER CANDIDATES

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

I certify that he/she is eligible to appear in university examination as per Ordinance, rules and Regulation of
 Gujarat University & Concern Council/Board.

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).....

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

- To be struck off where it is not applicable.

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

- (1) All mark-sheets as applicable H.S.C. All marksheet/1st B.P.T. (For Repeater)
- (2) Admission letter / Admission Order of Admitting Authority