



# Jhargram Government Medical College & Hospital Jhargram



## APPLICATION FORM FOR ADMISSION TO M.B.B.S COURSE IN ACADEMIC YEAR OF 2022-2023

NEET Rank.....State Rank (If any)..... NEET Quota Rank  
(if any)..... NEET Roll No.....

Marks obtained..... Out of..... (NEET Entrance Exam-2022)

Name of the candidate (in capital letter).....

Email Id (if any)..... Mobile No .....

Sex..... Date of birth..... Nationality..... Religion..... Caste..... P.H.  
(YES/NO).....

Permanent Residential Address (in Capital Letter):- .....

.....Pin.....

Local Address (if any) .....Pin.....

Guardian's Name (Father/Mother/Other):..... Relationship with candidate  
..... Mobile No..... Email Id(if any) .....

Annual Income (Father/Mother/Other)..... Occupation:.....

Mother's Name:..... Mobile No .....

Local Guardian's Name (For other state candidate): ..... Contact No.....  
..... Email Id(if any).....

Source of maintenance /Financial assistance for study:.....

Name of the school last attended and year of passing: .....

Curriculum Vitae prior to admission to M.B.B.S: **Details of school leaving Examination:-**

Name of the Board in 10+2	Division /Class/ Grade	Year of Passing	Subjects	Full Marks	Marks Obtained	Subjects	Full Marks	Marks Obtained
			Physics			English		
			Chemistry			Vernacular		
			Biology			<b>Grand Total</b>		
			<b>Total</b>					

University Registration No.(if any) with Name of the University: .....

I hereby certify that the above statements of particulars given by me are true and correct to the knowledge and belief. Further, I hereby agree to abide by the rules and regulation at present in force or that may hereafter be made by the Govt. for medical teaching institutions and I undertake that so long as I am a student of the college I will do nothing either inside or outside the college that will interfere with its Governance and Discipline.

Date:\_\_\_\_/\_\_\_\_/2022

Signature of the Applicant

Signature of the Father/Mother/Guardian