Form	No.	•	•••••
1 01111	110.	•	

K.J.SOMAIYA MEDICAL COLLEGE, SION, MUMBAI - 400 022

APPLICATION FORM FOR ADMISSION TO PG D.M.L.T.

(After B.Sc.) COURSE (ONE YEAR)

(For the Academic year 2017-2018)

		(I of the Alcae	aciiiic y cai 2017-20	010)				
		•	Receipt No.	·	• • • • • • • • • • • • • • • • • • • •			
			Date		:	· · · · · · · · · · · · · · · · · · ·		
1.	Name in full (Block c	apital)	:					
2.	` ' '		:					
3.	Name and Permanen	t	:					
	Address of Parents/Guardian		:					
4.	Religion Caste & Sub Caste		:					
5.	Date of Birth		·					
6.	. Month & Year Passing S.S.C. Exam		:					
7.	7. Month & Year Passing H.S.C. Exam		·					
8. Month & Year Passing B.Sc. Exam		1st Year:						
			2 nd Year :					
			3 rd Year:					
9. Name of the College & University		:						
	D . 11 (DC D					• • • • • • • • • • • • • • • • • • • •		
	Details of B.Sc. Degre		:					
.Sc.	Semester	Semester Princip		Marks	Out of	Attempt		
egre	e Passing Month &				Total			
ear	Year				Marks			

10. D	Details of B.Sc. Degree :		• • • • • • • • • • • • • • • • • • • •		
B.Sc.	Semester	Principal Subject	Marks	Out of	Attempt
Degree	Passing Month &			Total	
Year	Year			Marks	
1st Year	Ist Semester				
B.Sc.					
	IInd Semester				
2 nd Year	IIIrd Semester				
B.Sc.					
	IVth Semester				
3 rd Year	Vth Semester				
B.Sc.					
	VIth Semester				

I HEREBY DECLARE THAT THE INFORMATION FURNISHED ABOVE BY ME IS TRUE.

I agree if admitted to abide by the rules and regulations in force from time to time. I have carefully gone through all the rules and give an undertaking that I shall abide by the decisions of the Dean. I also understand that I am at risk of being deregistered if I do not diligently pursue my post graduate study to the satisfaction of my teacher and institute. I also understand if selected, that I will have to learn a basic certificate course in Computer & Typing as prescribed by the University, otherwise I will not be eligible for D.M.L.T. certificate.

not be eligible for D.M.L.T. certificate.				
Signature of the Applicant				
Place : Date :				
Note: Candidate should attach the attested Xerox Copies of:				
 Nationality and Domicile Certificate B.Sc All Semesters Statement of Marks B.Sc. Final Year Passing Certificate B.Sc. Degree Certificate College Leaving Certificate Migration Certificate S.S.C. & H.S.C. Passing Certificate, Affidavit for Gap Certificate (if applicable) Medical Fitness Certificate Incomplete application form is liable to be rejected 				
(For Office Use Only)				
SCRUTINY				
REMARKS:				