

**K.J. SOMAIYA MEDICAL COLLEGE,  
HOSPITAL & RESEARCH CENTRE, MUMBAI**

Eastern Express Highway, Sion, Mumbai - 400 022

SR. NO. ....

**APPLICATION FORM**

**Category - Management Quota**

**For Admission to MS Obstetrics & Gynaecology / MD Paediatrics  
(Management Quota 2014 - 2015)**

Name (in Block Letters) .....

Date of Birth : ..... Age : ..... Sex : .....

Address Local : .....

.....

.....

Permanent/Abroad : .....

.....

.....

Telephone No. : ..... Mobile No. ....

Telephone Contact Person : ..... Email .....

Subject applied for Education particulars : **Obstetrics & Gynaecology / Paediatrics**

	Year of Passing	College/University	Percentage of Marks	Attempts
Final MBBS Marksheet				
PGM-CET 2014 Marksheet				
Leaving Certificate				

Maharashtra Medical Council Registration No. : .....

MCI Registration No. : .....

Issue of Application Form Date : .....

Submission of Application Form Date : ..... Entered in Register at Serial No. ....

**Signature of Applicant** .....

**Note** : Attach attested copies of MBBS/Council Registration Certificate/PGM-CET 2014 Statement of Marks/Leaving Certificate and a Draft of Rs.2,000/- issued in favour of K.J. Somaiya Medical College, Mumbai as against processing fee. Incomplete Forms will be rejected.

*Original Certificates are to be submitted at the time of admission.*

Received Application Form from ..... Sr. No. .... for admission to MS Obstetrics & Gynaecology / MD Paediatrics (Management Quota 2014 - 2015)

Signature & Stamp