

# CHRISTIAN MEDICAL COLLEGE LUDHIANA SOCIETY

PASTE PASSPORT SIZE PHOTOGRAPH

ROLL NO. (For office use only)

# APPLICATION FOR UG ADMISSION WRITTEN TEST 2022 'BSc NURSING'

STAPLE 2 ADDITIONAL PASSPORT PHOTOGRAPHS

FILL IN DETAILS IN CAPITAL LETTERS ONLY

NAME OF APPLICANT (Full name as in Matriculation certificate)	

# PERSONAL DETAILS

NAME OF FATHER				
NAME OF MO	ГНЕК			
DATE OF BIRTH		GENDER:		RELIGION:
IF CHRISTIAN, MEMBER OF WHICH CHURCH:				
DURATION OF MEMBERSHIP: DATE OF BAPTISM:				TSM:
STATE OF DO	MICILE/RESIDENCE:			
CORRESPOND	ENCE ADDRESS:			
TELEPHONE NO.	RESIDENCE (WITH STD COD		MOBILE	ALTERNATE
EMAIL ID:				
COURSE APPLYING FOR (Please tick)  BSc NURSING				
NAME OF CHURCH/MEMBER BODY WITH WHOM THE CANDIDATE IS  BSc NURSING:				
SIGNING THE SERVICE AGREEMENT WITH (REFER TO BULLETIN www.cmcludhiana.in)				

# TEST CENTER: LUDHIANA

# **ACADEMIC DETAILS**

	BOARD	YEAR OF	STATE FORM WHERE	RESULT
		PASSING	COMPLETED	(CGPA/PERCENTAGE)
X STD				
XI STD				
XII STD				

#### **BSc NURSING:**

Category	Category Code	Please Tick
Punjab Female Open General	1	
Punjab Male Open General	2	
Non Punjab (All India) Female Open General	3	
Non Punjab (All India) Male Open General	4	
Christian Minority with Service Commitment - Punjab Female	5	
Christian Minority with Service Commitment -Punjab Male	6	
Christian Minority with Service Commitment -Non Punjab (All India) Female	7	
Christian Minority with Service Commitment -Non Punjab (All India) Male	8	
Punjab Female SC / ST	9	
Punjab Female BC	10	
College Sponsored	11	
NRI	12	

#### TRANSACTION DETAILS

BANK NAME	DEMAND DRAFT – in favour of 'Christian Medical College Ludhiana Society', Payable at Ludhiana. (Amount: Rs.3500/-)		
	Number	Date	

#### **DECLARATION**

I hereby declare that I have read the information bulletin in its entirety.

I hereby declare that I am an Indian National.

I understand that the Application Fee once paid is not refundable.

I hereby declare that the Information provided by me is true and correct to the best of my knowledge.

I further declare that I will provide the original of all certificates, relevant to the claims made by me, at the time of admission.

I agree to forfeit my claim to admission in the event any information provided by myself is found to be false or I am unable to produce the relevant original certificates.

#### ENCLOSURES FOR 'CHRISTIAN MINORITY WITH SERVICE COMMITMENT CATEGORY':

Copies of: 1. Church Membership Certificate (As per format) 2. Baptism Certificate 3. Letter of Service Commitment (from Church/Member body of CMC Ludhiana Society with whom the candidate is signing the Service Agreement) signed by Authorized Signatory only

NAME SIGNATURE DATE

(Refer to Prospectus page 15, 16 for filling the application form and for necessary documents to be attached)

A scanned copy should be emailed to registrar@cmcludhiana.in along with the enclosures.

The hard copy of filled form and the enclosures should 'be sent to "The Registrar, Christian Medical College Ludhiana, Punjab 141008 by courier/by hand latest by 25<sup>th</sup> July, 2022.