



GURU NANAK INSTITUTE OF MEDICAL TECHNOLOGY

Main Road, Factory Area, Patiala. Ph. 0175-2351810, 5001507

APPLICATION FOR ADMISSION



This Form is to be filled in the applicant's own hand writing in Block Letters.

1. Course Code

SESSION

Form No.

2. Full Name of the Applicant

Please Paste
recent
passport size
photograph here
Do not staple

3. Father's/Husband's name

Mobile No.

4. Nationality

5. Date of Birth

6. Sex

1. Male
2. Female

7. Resident

1. Urban
2. Rural

8. Category

1. Gen
2. SC
3. ST
4. OBC
5. Others

9. Permanent Address (Do not repeat name)

State

Pin

STD Code

Mobile No. of Father /Mother

10. Complete Address for Correspondence (Do not repeat name)

STD Code

Telephone No. (If any)

11. Qualification

1. For 10
2. For 10+2
3. For U.G. Degree
4. For P.G. Degree

12. Course Name

13. Hostel Required (Please Tick)

YES

NO

14. Have you ever been convicted by any court of law? if so please give the details

YES

NO

P.T.O.

15. Details of academic records (from 10th standard onwards)

	Name of the Exam. Passed	Board/Univ.	Roll No.	Year of Passing	Subjects	Mark Obtained	% of marks
1.	MATRIC						
2.	10+1, 10+2						
3.	B.A./B.Sc/B.Com.						
4.	OTHERS						

Student and Guardian/Parent's Undertaking/Declaration**16. We jointly do hereby solemnly affirm, Undertake and Declare as under:-**

- I. The entries in this form and the additional particulars (if any) furnished reply to the question above are true to the best of my knowledge and belief.
- II. I am physically fit and do not suffer from any physical deformity/communicable disease.
- III. I shall be willing to serve in any department or the Institute Hospital/Clinic/Urban or rural areas at any time during my practical training class/period or field practice.
- IV. I do hereby agree to pay the cost of damage caused to the movable and immovable property of the GNIMT, Patiala.
- V. I have noted that the fees once paid by me is neither refundable nor adjustable in any circumstances and in case of any dispute between me and the Institute, the jurisdiction for legal proceeding will be Patiala only.
- VI. I shall extend my full co-operation and agree to abide by the decisions/instructions of the Institute and shall have no objection if I am awarded fine for any act of misbehavior, disobedience and for being absent from the class and I will have good personal behavior, with the teachers and other staff members of the Institute and I shall not take part in the Political activities, unions, associations of any kind and any types of strike.
- VII. I and my parents/guardians have carefully gone through the prospectus, rules & regulations & terms and conditions of GNIMT, Patiala and at my own will and desire. I hereby apply for admission in the above said course.
- VIII. That the student will attend all the Theory, "Tutorial and Practical Classes and will maintain attendance above 75% in each subject in order to be able to appear in the examination as per the rules of Institute in force and that shall be binding on us. We are fully aware that the attendance will be given only to the registered students of the institute.
- IX. That the institute does not have any responsibility of Employment in any State of the Country/abroad. That I understand that the diploma course is not self-employment and Job-oriented in nature.
- X. I have read the contents of the prospectus carefully and understand that the IPMT New Delhi is recognised by Health and Family Welfare Department of Government of Nagaland/as per the details mentioned in the prospectus, and has seen all the documents pertaining to it. In case of any changes brought by the Governmental agencies From time to time/in between of completion of my course, the institute and its management cannot be held responsible in any manner for the same.

That I had clearly understood the recognition status of the institute and I/my family is fully satisfied with it.

14 recent passport size photographs and two attested copies of Certificate/Diploma/Degree Testimonials are attached herewith.

Please accept my Admission Form /Registration duly completed and oblige.

Yours faithfully,

Place.....

Date.....

Signature of the Guardian/Parents

Signature of the Candidate

FOR GNIMT OFFICE USE ONLY

Amount Received Rs.....(in figures).....

Receipt No. & Dated..... Draft No & Dated.....

Authorized Signatory