

**Dayanand Medical College & Hospital, Ludhiana**  
**DM/MCh/MD/MS/Diploma Courses-2011**  
**Application Form for DM/MCh/MD/MS/Diploma Courses**  
*(To be submitted after selection by BFUHS)*  
**Downloaded Application forms must be accompanied by application fee**

Paste attested PP size Photograph as on BFUHS Admit Card (DONOT staple)

Internship completed by 31/3/2011 :  Yes  No  
 MBBS from :  DMCH, Ldh  CMCH, Ldh  SGRD, Asr  GMC, Asr  
 GMC, Patiala  GGSMC, Fdk  Outside Punjab  Outside India

**Quota and Category**

Govt. Quota	<input type="checkbox"/> Open (Gen) <input type="checkbox"/> Open (IP) <input type="checkbox"/> SC <input type="checkbox"/> BC <input type="checkbox"/> HC
Management Quota (excluding NRI)	<input type="checkbox"/> Open (Gen) <input type="checkbox"/> Open (IP) <input type="checkbox"/> SC <input type="checkbox"/> BC <input type="checkbox"/> HC <input type="checkbox"/> Rural Quota
NRI seats	<input type="checkbox"/> NRIs who originally belonged to the State of Punjab <input type="checkbox"/> NRIs who originally belonged to Indian State other than Punjab <input type="checkbox"/> Left over NRI seat.

**PGET-2011 (Not applicable to NRI candidates)**

Roll No <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>	Marks Obtained (Out of 800) <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>
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**If Prospectus is downloaded from the Internet :**

Receipt/Draft No. : <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>	Date: <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>
Amount : Rs. 3,000/- for NRI seats and Rs. 1,200/- for non-NRI and leftover NRI seats Rs.3000/-	
Issuing Bank & Branch: _____	
<b>N.B. Draft must be payable at Ludhiana</b>	

**Personal Information**

<b>Candidate's Name (as on MBBS degree / certificate) :</b>	
Dr. <input style="width: 100%; height: 20px;" type="text"/>	
Date of Birth <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female Married : <input type="checkbox"/> Yes <input type="checkbox"/> No
Cell Phone No. <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>	email ID: _____@_____
Landline Phone : Country Code: <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>	STD Code : <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> Phone No: <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>

**Mailing address :**

<input style="width: 100%; height: 100%;" type="text"/>	<input style="width: 100%; height: 100%;" type="text"/>
<input style="width: 100%; height: 100%;" type="text"/>	<input style="width: 100%; height: 100%;" type="text"/>
<input style="width: 100%; height: 100%;" type="text"/>	<input style="width: 100%; height: 100%;" type="text"/>

City  Pin code

**Permanent address:**

<input style="width: 100%; height: 100%;" type="text"/>	<input style="width: 100%; height: 100%;" type="text"/>
<input style="width: 100%; height: 100%;" type="text"/>	<input style="width: 100%; height: 100%;" type="text"/>
<input style="width: 100%; height: 100%;" type="text"/>	<input style="width: 100%; height: 100%;" type="text"/>

City  Pin code

**Parents/Spouse**

Family	Name	Contact Phone No		email ID
		Landline	Mobile	
Father				
Mother				
Spouse (if applicable)				

**MBBS Career**

Examination	College	Extra Attempts	Marks Obtained	Maximum Marks
<b>1<sup>st</sup> Prof.</b>				
<b>2<sup>nd</sup> Prof.</b>				
<b>Final Part I</b>				
<b>Final Part II</b>				

Course & Discipline joined \_\_\_\_\_

**Post Graduation Qualification (if applicable)**

Course & Discipline \_\_\_\_\_ Institution \_\_\_\_\_ Extra attempts \_\_\_\_\_

Year of Passing \_\_\_\_\_ University \_\_\_\_\_

I hereby agree to abide to the rules and regulations in force at present or that may be made hereafter by the administration of the College and undertake that I shall do nothing inside or outside the College that will interfere in the orderly administration and discipline.

Left Thumb Impression of Male Candidate	
Right Thumb Impression of Female Candidate	

I have enclosed the documents as per checklist on P 44 of prospectus

\_\_\_\_\_  
Signature of the Candidate

\_\_\_\_\_  
Date

\_\_\_\_\_  
Place