

MAA AMBEY INSTITUTE

of Nursing & Paramedical Sciences

(Run by - Ahana Charitable Trust)

APPLICATION FORM FOR REGISTRATION / ADMISSION TO DIPLOMA / UNDERGRADUATE DEGREE PROGRAM

Session:

Affix recent

Application No			Passport size colour photo-graph
1. Name			
2. Date of Birth			
2. Nationality			
4. Aadhar No		<mark>Blood</mark> Group	
5. Correspondence Address			
	<u></u>	<u> </u>	
Mobile No	E-mail	[
6. Permanent Address		<u></u>	
		.,	
7. Category (Gen/SC/ST/O			
B. FAMILY DETAILS :-			
Father's/ Husband's Name			
Occupation	Mobile N		
Mother's Name	Occupation	on	
Guardian's Name	Occupation	on	
Address	CADEMIC • CREATIVE	EXECELLENCE	
	Mobile N	0	

C. EDUCATION QUALIFICATION:

Exam Passed	Stream	Year of Passing	Board/University	Marks Obtained	Div.	Per. (%)
High School						
10+2/ Inter						
Graduation						

D. <u>SUBMISSION OF DOCUMENTS</u>:-

(A) Original Certificate:

- (1) 10th Marksheet & Certificate
- (2) 10+2 / Inter Marksheet & Certificate or Provisional Certificate
- (3) 10+2 / School / College Leaving / Transfer Certificate
- (4) 10+2 / Inter Migration Certificate. (If any)
- (5) Colour Passport Size Photograph 8 Copies

(B) Photo Copies of Certificates:

- (I) Aadhar Card (ii) PAN Card (iii) Domicile Certificate (iv) Caste Certificate (v) Income Certificate
- (vi) Bank Passbook Front & 1st Inner Page Self (vii) Bank Passbook Front & 1st Inner Page Guardian

	CLARATION
	do hereby solemnly affirm and declare that
 concealed. I shall fully abide by the orders rules a considered. I shall not violate the rules and regula ragging or such other activities harmful be struck off from the admission regist paid. I admit that any charges/fees paid to twhatsoever may be the reason. In case, shall be liable for payment of all dues to I shall pay the fees and all other dues in time. I will attend regular classes upto 80 development programmes. 	ne best of my knowledge and belief and nothing has been and regulations of this college stated, ignorance will not be tions of the institute by taking part in any kind of strikes, to the administration/institution. If I do so, my name should er of institution and shall not be allowed for refund of fees the institution will neither be refundable nor transferable, I leave the institution before the completion of the course. I the College. time as mentioned in the prospectus / notified from time to to 100% and participate in College activities and self ction of Nainital High Court, Uttarakhand only.
	out of Transmittigh Court, Crantainana only.
	do hereby solemnly affirm and declare that
	Signature of the Candidate
Mr. / Msshal	l be responsible for regular payment of fees, any other g his/her study in Maa Ambey Institute of Nursing &
Place Date	Signature of the Father / Guardian

FOR OFFICE USE ONLY

Merit Position No.:	Batch:
Admission:	Authorized Signatory: