

**Schedule-I
(Rule-3)**

APPLICATION FORM

NEET(UG) Roll No.:

NEET (UG) ALL India Rank:

(To be submitted at the time of Counseling)
APPLICATION FORM FOR ADMISSION INTO BAMS/BHMS COURSES (STATE QUOTA), SESSION 20.....

IMPORTANT INSTRUCTIONS:

1. Please read the Rules and Instructions carefully before filling this Form
2. Use blue or black ball pen for filling the form

To paste the passport size Photograph (not to be stapled)

1. Name (in Block Letters):

2. Father's Name: :

3. Mother's Name:

4. Full Postal Address for communication :

Full Signature of the Candidate
(within the box)

C/O..... Vill/Town/City

P.O..... PIN.....

Dist : State

Telephone No												
Mobile No.												
E-Mail												

5.	State in which Applicant is a permanent Resident	
6.	Age on 31 st December of the year of admission	

7.	Permanent Home Address (write only if separate from SL No.4):			
	Locality			
	Post Office		Sub Division	
	P.O.		P.S.	
	Dist.		State	

8.	Physical Identification Mark:
	(a)
	(b)
9.	Nationality:
10.	University/Board/Council Registration No.:

11. Category/categories code under which state quota seat is sought (darken the appropriate circle/circles):

Gen	<input type="radio"/>	SC	<input type="radio"/>	ST(P)	<input type="radio"/>	ST(H)	<input type="radio"/>
OBC/MOBC	<input type="radio"/>	PH (Divyanga)	<input type="radio"/>	TGL/Ex-TGL	<input type="radio"/>	EWS	<input type="radio"/>

12. Course of Choice in order of Preference (write 1st/2nd in the appropriate box) :

BAMS		BHMS	
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13. In case of BHMS the college of choice in order of preference (Write 1st/2nd/3rd in appropriate box) :

(i) SJNHMC&H, Guwahati		(ii) AHMC&H, Nagaon		(iii) Dr. JKSHMC&H, H, Jorhat	
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14. Details of Examination passed (attached true copies of the certificate) :

Examination	Name of University/ Board/Council etc.	Institute from where passed		Year of passing	Division	% of marks
		Name	State			
HSLC or Equivalent						
HSSLC or equivalent (Sc.)						

15. Marks obtained in HS/10+2 or equivalent Examination (Attach true copy of marksheets)

Subject	Maximum marks		Marks obtained		Total marks of each subject.	% of marks obtained in Physics, Chemistry & Biology / Biotechnology
	Theory	Practical	Theory	Practical		
Physics						
Chemistry						
Biology/ Biotechnology						
English						

DECLARATION BY THE CANDIDATE

I declare that the above entries in the form has been filled up in my own handwriting and the entries made are correct as per my documents and to the best of my knowledge and belief. I agree that if any statement is proved to be false then the Authority shall have the right to take legal action against me for submitting false information or statements.

I further declare that there is no allegation of misconduct against me and I have never been convicted for any offence involving moral turpitude.

Date :

Place :

.....
Signature of the Candidate in full

DECLARATION BY THE PARENT / GUARDIAN

In the event of my Son/ Daughter / Ward Shri/ Smti being admitted in any institution, I shall be responsible for his / her conduct and undertaken to pay his / her college dues, hostel dues and other expenses during his / her studentship in the college, I also undertake to withdraw him / her from the college, should the authorities concerned decided that such withdrawal is necessary in the interest of the college or in the event of inability to pay his / her college or hostel dues in time or due to his / her unsatisfactory result and attendance and conduct after clearance of all his / her dues if any and without claiming any compensation from the Government or the college authorities.

I, further declare that there is no allegation of misconduct against my son / daughter / ward and he / she has never been convicted for any offence involving moral turpitude.

I, further declare that if any statement is proved to be false then the authority shall have right to take legal action against me and my son / daughter for submitting false information and statements.

I certify that the particulars stated in this application by my son / daughter / ward are true to the best of my knowledge and if it is proved that the information is fraudulent, I am liable to criminal prosecution.

.....
Signature of the gazetted officer (with seal) in
Presence of whom the parent / guardian
Put his / her signature

.....
Signature of the parent/Guardian
Full Name.....

Designation of the Officer. Seal of the Office.....

INSTRUCTION TO ALL CANDIDATES

- 1) Candidate must produce the filled-up Application Form along with all the relevant certificates in the Annexures within the Application Form.
Signature and counter signature as noted thereon.
- 2) All applicants shall have to produce the original copies of the following documents along with their completed application Form at the time of counseling, if called for.
 - a) Admit card and pass certificate of HSLC or equivalent examinations.
 - b) Marks sheet and pass certificate of HSSLC (Sc.) or equivalent examinations.
 - c) Caste certificate.
 - d) Permanent Residential Certificate.
 - e) Admit Card of the NEET.
 - f) Other Reservation quota certificate.
- 3) The candidate must be physically present at the time of counseling.
- 4) A set of self attested/signed photocopies of the above mentioned (at Instruction Point-2) original documents must be submitted at the time of Counseling.

**SCHEDULE -I
ANNEXURE -I**

(As per the admission rule for BAMS/BHMS courses this certificate is to be issued only to one i.e. in the name of the candidate or his/her father/mother whoever is residing in Assam continuously for a minimum period of 20 years)

**PERMANENT RESIDENCY CERTIFICATE OF CANDIDATE OR HIS/HER
FATHER/MOTHER
(Certificate of 20 years of continuous Residency in Assam)**

This is to certify that the following person:

Name:

Relation of the above person with the candidate - the candidate himself or herself/father of the candidate/Mother of the candidate (give tick mark at the proper relation)

Is residing in village/town P.O.....
P.S.....Mouza.....District.....
..... of Assam continuously for years as per available documents and records.

This certificate is issued only for admission into Educational Institutions.

Signature of Deputy Commissioner or his/her authorized
Officer of the concerned District

Date :

Full Name of the Certifying

Officer.....

SCHEDULE-I ANNEXURE – II

Certificate of study in Assam by the candidate

(Separate Certificate in this format shall have to be submitted if studied at more than one school. Please do photocopies of this format accordingly before filling it up)

Name of Candidate :

Name of Father :

Name of Mother :

Residential Address :

Certified that the above named candidate/person has studied in my school and his/her particulars during his/her study in my school as obtained from school records is given below -

Date of Admission :

Class in which admitted:

Class in which candidate left school:

Date of leaving School:

Reason for leaving School:

1. Completed course
2. Transferred to other School
3. Any other reason

The information provided above are true to my knowledge and belief and records.

Full Signature of the Head Master/Principal:

Seal with date.....

Full Name of the Head Master/Principal.....

Address of the School:

INSTRUCTION:

Certificate without the signatures as specified above shall not be accepted.

SCHEDULE-I
ANNEXURE-III
CERTIFICATE OF CASTE FOR THE CANDIDATES BELONG TO
OBC/MOBC CATEGORY (NON CREAMY LAYER)

Name of Candidate :
 Name of Father :
 Name of Mother :
 Residential Address : Village:
 PO.....
 PS.....
 Sub-Division.....
 District.....
 PIN.....

Certified that the above named candidate/person belongs to Other Backward Classes/More Other Backward Classes and his/her Sub-Caste is..... and community is.....

This is also certified that the above named person falls under the category of Non Creamy Layer of OBC/MOBC.

This certificate is issued to the candidate after making proper enquiry to his/her caste status as per prevailing rules of Assam and guidelines issued by Govt. of India from time to time.

Signature of the Identifying Authority
 Full Name of the Identifying Authority

Date :

Countersigned by the DC/SDO of the concerned
 District/Sub-Division
 Full Name of the Certifying officer.....
 Date:

INSTRUCTIONS :

- a) Sub caste and/or Community in the certificate must be mentioned.
- b) Certificate without signature of both the Authorities/Officers shall not be accepted.
- c) Signature of any one of the following Identifying Authority is a must.
 - (i) Chairman of Sub-Divisional Dev. Board for the Welfare of the Other Backward Class within respective Sub-Division.
 - (ii) Member of All Assam State Advisory Council for the Welfare of the Other Backward Classes within the respective District to which the Member belongs.
 - (iii) President/Secretary of All Assam Other Backward Class Association within the jurisdiction concerned.
 - (iv) President/Secretary of district/Sub-divisional Other Backward Classes Association within the respective jurisdiction.

CERTIFICATE OF CASTE FOR THE CANDIDATES BELONG TO SC CATEGORY

Signature of the DC of the concerned District
Date with seal.....

- a) Sub caste and/or Community in the certificate must be mentioned.
- b) Certificate without signature of both the Authorities/Officers shall not be accepted.
- c) Signature of any one of the following Identifying Authority is a must.
 - (i) Chairman of Sub-Divisional Scheduled Caste Dev. Board.
 - (ii) President and Vice-President of the Assam Anusuchit Jati Parishad.
 - (iii) President of District level Assam Anusuchit Jati Parishad.
 - (iv) President of Sub-Divisional level Assam Anusuchit Jati Parishad.
 - (v) President and Vice-President of All Assam Mali Samaj.
 - (vi) President of District Committee of All Assam Mali Samaj.
 - (vii) President of Sub-Divisional Committee of All Assam Mali Samaj.
 - (viii) President/Secretary All Assam Schedule Caste Dhobi People Welfare Council.

SCHEDULE-I
ANNEXURE-V
CERTIFICATE OF CASTE FOR THE CANDIDATES BELONG TO ST (P)/ST (H)
CATEGORY

Name of Candidate :
Name of Father :
Name of Mother :
Residential Address : Village:.....
PO.....
PS.....
Sub-Division.....
District.....
PIN.....

Certified that the above named candidate/person belongs to (Name of the tribe)
.....Tribe which is recognized
as..... under the Constitution
(Schedule Tribes) order 1950 as amended from time to time.

This certificate is issued to the candidate after making proper enquiry to his/her caste status as per prevailing rules of Assam and guidelines issued by Govt. of India from time to time.

Signature of the President/Vice-President of
All Assam Tribal Sangha/District Unit of Assam Tribal Sangha

Full Name of the Signatory.....
Seal with Date.....

Counter Signature of the DC of the
concerned District

Seal with Date.....

INSTRUCTIONS :- Certificate without signature of both the Authorities/Officers shall not be accepted.

Seal with Date:.....

INSTRUCTIONS :- Certificate without signature of both the Authorities/Officers shall not be accepted.