

BANARAS HINDU UNIVERSITY

INSTITUTE OF MEDICAL SCIENCES

VARANASI - 221005

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APPLICATION FORM FOR APPEARING IN B.SC. NURSING &B. PHARM (AY.) ENTRANCE TEST - 2010

Last date to reach the completed form to the Director, Institute of Medical Sciences, BHU: _15TH April, 2010
THIS FORM CONTAINS FOUR PAGES TO BE FILLED BY THE CANDIDATE
Candidates are advised to read the form and Information & Instruction Booklet carefully before filling up the application form

(For Office Use Only)	
Date of Receipt:	
Provisionally allowed/Not allowed Diary No. / Receipt No.:	
Reasons:	
(To be filled in by the candidate in own handwriting)	_
Tick (√) the appropriate box	
1. Course applied for: i) B.Sc Nursing ii) B. Pharm(Ay.)	iii) Both
2. Details of Demand draft Enclosed	
DD No. Date. Amount.	•••••
Bank Name Issuing Branch Payable at Varana	asi
3. Name of the candidate	
(in block letters)	
4. Father's Name :	-A-
5. Mother's Name :	Paste self attested
6. Date of birth :	recent passport size
8. State to which belongs:	front view
9. Sex: Male Female	photograph
10.Category: SC ST OBC GEN	
** PC candidate SC \square ST \square	
OBC GEN GEN	
11. Address for Correspondence:	
•••••	• • • • • • • • • • • • • • • • • • • •
Tel. No. with STD Code	
12. Permanent address:	
	••••

^{**} Physically challenged (PC) candidates are not eligible for B.Sc. nursing course.

13. Deta	ails of the Examinations	passed:				
Nam	ne of the examination	University/ Board	Year	Subjects	Marks obtained / Maximum marks	% of Marks
High Sch	nool or equivalent					
I.Sc. / 10	+2 or equivalent					
Any Oth	er, Specify					
14. Cho	Percentage of marks in I vice of Language of Que ne and Full Address of t	stion Paper in the	Test:	& English in qualifying ex	_	
1. 2. 3. 4. 5. 6. Date:	and complete and nothing incorrect or any of the inf IMS, Banaras Hindu Uni Institution. I shall abide by the decision the classes and shall abide I promise to submit/show Certificates at the time of shall stand cancelled. I understand that if I fail	n and Instruction Bothave not taken part is been duly filled and has been concealed formation has been diversity, shall be liable on of the Head of the de by the Rules & Rooriginal copies of a my admission to the to submit relevant	oklet careful in any activ d signed by or distorted concealed o ble to be su Institution egulations o all my Educ Admission documents		entries made in my Applications. Nursing/B.Pharm(Ay.) control of notice whatsoever by the Inpline, examination, residence so, Mark Sheets as well as other to do so, my admission to	on Form are ourse at the, Head of the , attendance her relevant IMS, BHU
Place:		Signature of the Candidate (In running handwriting)				
any dues	responsible for the behavior to the University.	ter / Ward being ad and conduct of my S that in all matters o	mitted to B Son/Daught f admission	HE FATHER / GUARDIAN .Sc. Nursing/B. Pharm (Ay) Co er / Ward during the entire cours a, discipline, examination, reside e Head of the Institution.	e of studies and shall make p	ayments for
Date: Place:				Ü	re of the Father / Guardian n Full & Relation with the C	



BANARAS HINDU UNIVERSITY

INSTITUTE OF MEDICAL SCIENCES VARANASI – 221005

B.SC. NURSING & B. PHARM (AY)
ENTRANCE TEST – 2010
ON Sunday 23RD May, 2010
PROVISIONAL ADMIT CARD

Roll No.

Issued for (Course)			
Examination Centre (To be filled by the office)		Т	ime: 10.00 am to 12.00 noon
	(To be fi	illed by the candidate in own handwri	ting)
Admit Provisionally	Ms		n
(in BLOCK LETTERS) Son/Daughter/Ward of Sri.			-B- Paste self attested
Address:			front view
		• • • • • • • • • • • • • • • • • • • •	" photograph
]
Specimen signature of the (In running handwriting)	ne Candidate		Authorized Signatory (for Office Use)

INSTRUCTIONS FOR CANDIDATE

Right Thumb impression of the female candidate Left Thumb impression of the male candidate

- 1. Candidate must bring Admit Card with his/her to secure entry in the examination room.
- Mark your answers on the "Answer Sheet" by blackening the circles using BALL POINT PEN WITH BLACK INK. (Read the instructions given in the Information & Instruction Booklet supplied with the form carefully).
- 3. PLEASE BRING YOUR OWN WRITING MATERIAL.
- 4. ENVELOPE OF ADMIT CARD / ANY OTHER PAPER / ANY RESOURCE MATERIAL/CALCULATORS/SLIDE RULE/MOBILE PHONE/ PAGERS ARE NOT ALLOWED.
- 5. The examination rooms will be opened half an hour before the commencement of the examination.
- 6. No candidate will be admitted to the examination room after **Fifteen minutes** of start of the examination (upto 10.15 a.m)
- 7. No candidate will be allowed to leave the examination room till the examination is over.
- 8. Candidate should not leave the examination room without handing over his/her question booklet and answer sheet to the Invigilator.
- 9. Candidates will be required to sign his/her attendance and thumb impression at designated place in the presence of the invigilator when directed to do so by the Invigilators.
- 10. Candidates who fail to observe these regulations may be disqualified and debarred from appearing in the entrance test and any subsequent examination held by the University.

THE ADMIT CARD IS BEING ISSUED PROVISIONALLY SUBJECT TO THE SCRUTINY OF THE ELIGIBILITY. IT IS ONLY AFTER VERIFICATION OF THE ELIGIBILITY THAT THE CANDIDATE WOULD BE CONSIDERED FOR ADMISSION. MERE APPEARING OR QUALIFYING IN THE TEST DOES NOT ENTITLE A CANDIDATE FOR SELECTION/ADMISSION

PRESERVE YOUR PROVISIONAL ADMIT CARD WHICH HAS TO BE PRODUCED BEFORE ADMISSION COMMITTEE IN CASE OF YOUR SELECTION.



BANARAS HINDU UNIVERSITY

INSTITUTE OF MEDICAL SCIENCES VARANASI – 221005

B.SC. NURSING & B. PHARM (AY)
ENTRANCE TEST - 2010
ON Sunday 23RD May, 2010
REGISTRATION CARD

Roll	No.
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Course applied for Examination Center To be filled in by the Office)		•
(To be filled in by the candid	late in own handwriting)	
l. Full Name:		-C-
2. Father's name:	Paste self attested recent passport size front view photograph	
l. Address:		
5. Specimen signature of the Candidate at the time of applying Signature of the Candidate (In running handwriting)	IN PRESENCE O	E EXAMINATION HALL OF INVIGILATOR he time of applying
		of the Candidate g handwriting)
Candidate's Right Thumb impression for female Left Thumb impression for male	Candidate's Right Thumb impression for female Left Thumb impression for male	
Signature & Seal of the Principal of the School/College last attended	Name and Signature of Signature a	the Invigilator Verifying the