



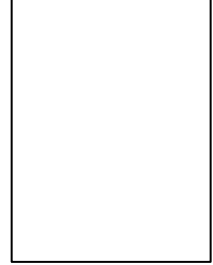
## MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

Reg.No.-----  
(For Office use only)

Application for Admission to the \_\_\_\_\_

\_\_\_\_\_ Course

run by MUHS, Nashik at Dept. of \_\_\_\_\_



1) Name : \_\_\_\_\_  
(In Capital letters) Surname First Name Father's /Husband's Name

2) Address for Correspondence : \_\_\_\_\_

\_\_\_\_\_ Pin Code \_\_\_\_\_

3) Contact Tel. Nos. STd code \_\_\_\_\_ (Res.) \_\_\_\_\_ (Off.) \_\_\_\_\_  
E-mail ID \_\_\_\_\_ Mobile No. \_\_\_\_\_

4) Date of Birth : \_\_\_\_\_ (in words) \_\_\_\_\_

5) Age as on : \_\_\_\_\_

6) Nationality : \_\_\_\_\_ 7) Religion : \_\_\_\_\_

8) I belong to the Category mentioned below:  
(Please roundup your appropriate Category )

Category :	SC	ST	VJ (A)	NT (B)	NT (C)	NT (D)	OBC	SBC	OPEN
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(The candidates belonging to VJ(a), NT(b), NT(d), OBC categories should submit Non-Creamy Layer Certificate issued on or after 01/04/2007 by the appropriate authority, otherwise their application shall be treated as Open category)

9) Sex :  Male  Female

10) Marital Status : Married/Unmarried

(Please strike ✓ mark)

11) Application Fees : Rs. \_\_\_\_\_ D.D.No. \_\_\_\_\_ Date : \_\_\_\_\_

Name of the bank : \_\_\_\_\_

(Draft drawn on Nationalized Bank payable at Nashik and please put your name & address behind the D.D)

12) Educational Qualifications: (Mandatory to attach all necessary copies of attested Mark Sheets)

SN	Degree	Year of Passing	Percentage of marks Obtained

13) Experience : (Mandatory to attach all necessary Certificates)

SN	Name of the Institution	Post held	Period	
			From	To

14) Research Publications : A) National: \_\_\_\_\_  
 (Please attach list separately)

B) International: \_\_\_\_\_

15) I Certify that the foregoing information is correct and complete to the best of my knowledge and belief and nothing has been concealed/distorted. If at any time I am found to have concealed/distorted any material information my candidature shall be liable to be summarily terminated without notice /compensation.

Place :

Date:

(Signature of the Candidate)

**NOTE:** 1) Please attach all Attested photocopies of the documents alongwith the application form

2) Incomplete Application will be rejected immediately and no correspondence will be entertained on this behalf.