For office use

ADMISSION FORM 2016-17

- B.Voc. Medical Laboratory Science (MLS)
- B.Voc. Medical Electrophysiology (MEP)

Deen Dayal Upadhyay Kaushal Kendra

(Centre for Physiotherapy & Rehabilitation Sciences) Jamia Millia Islamia, New Delhi – 110 025.

* Duly filled application form must reach the Office of the Hony. Director, DDU Kaushal Kendra, Centre for Physiotherapy and Rehabilitation Sciences, Jamia Millia Islamia, New Delhi-110025, on or before 15 July 2016.

Recent Self

attested

Passport Size

Photograph

(All particulars must be filled-in by the candidate in his/her own hand writing) Choice of Course (in order of preference): 1 2.								
Category Code (As mentioned at the bottom of the next page)								
1. Candidate's Name:								
2. Father's Name:								
3. Mother's Name:								
4. Address: (i) For Correspondence								
Pin Code								
(ii) Permanent								
Pin Code								
(iii) Phone Number:-								
5. Date of Birth (Based on Matriculation/ Secondary School Certificate) Date Month Year								
6. Nationality:								
7. Sex: Male/Female								

8. Educational Qualification:

Sl.	Exam Passed	Board/	School /	Year	% of	Division	Subjects
No.		University	College		Marks		
1.	Matriculation						
	/ High School						
2.	10+2 Level						
3.	Any Other						
	(Having						
	NSQF Level 4						
	or above)						

	7 0									
2.	10+2 Level									
3.	Any Other (Having NSQF Level 4 or above)									
9. In	tervening period	, if any (dura	ation and rea	son in brie	ef):	l .		I.		
-										
10.	No. of Bank Draf	t/ Pay order	of Rs.100/- <u>.</u>							
Date	<u>.</u>			Dra	. Drawn Bank					
						Sig	gnature o	of Applicant		
			DECL	ARATION						
	reby, solemnly o			_				-		
knov	vledge and belief	I understan	d that my ca	ndidature	is subject	to the con	ditions la	aid down in		
the J	amia prospectus.	I further de	clare that I a	am not inv	olved in a	ny crimina	al case ar	nd/ or such		
case	is not pending ag	ainst me in	any court of	law.						
Signature of Father/ Guardian Signature of A										
<u>Date</u>	d			Dated				<u>.</u>		
Com	pletely filled App	lication forn	n must be su	bmitted ald	ongwith t	ne followir	ıg:			
1	Colfottoatad n	andrahaata	falaca 10th /	11-4-2-1-4	-i on					

- 1. Self attested mark-sheet of class 10th / Matriculation
- 2. Self attested mark-sheet of class 12th (or equivalent of having NSQF4)
- 3. No Objection Certificate from the Employer (in case applicant is employed)

Category Code:

G-General, M-Muslim, MW-Muslim Women, MO-Muslim OBC, J-Jamia KM- Kashmiri Migrant, JK- Jammu& Kashmir, PD- Person with Disability