

**OPTION FORM FOR ADMISSION TO MBBS/BDS COURSES UNDER NEET UG-2019**

University Registration ID no. \_\_\_\_\_

Dated \_\_\_\_\_

(To be filled by the Candidate in his / her own handwriting)

1. **Category applied for** ➤ \_\_\_\_\_
2. NEET Roll No ➤ \_\_\_\_\_ 3. NEET Marks \_\_\_\_\_
4. NEET Rank ➤ \_\_\_\_\_ 5. NEET Percentile \_\_\_\_\_
6. Name of the Candidate ➤ \_\_\_\_\_
7. Father's Name ➤ \_\_\_\_\_
8. Date of Birth ➤ \_\_\_\_\_
9. Age as on 31.12.2019 ➤ \_\_\_\_\_
10. Name of School & State ➤ 10+1 \_\_\_\_\_  
from where +1 & +2 10+2 \_\_\_\_\_  
Passed

Class	Passing Year	Marks obtained/ Total Marks								Total of PCB		
		Physics		Chemistry		Biology		English		Obt.	Out of	%age
		Obt.	Out of	Obt.	Out of	Obt.	Out of	Obt.	Out of			
10+1												
10+2												

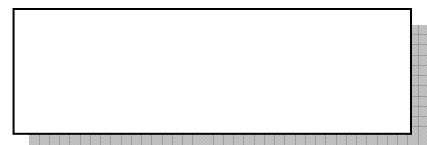
12. Aadhaar Card No. ➤ \_\_\_\_\_ Mobile No. \_\_\_\_\_
13. Permanent Address ➤ \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
14. Email-ID (valid) ➤ \_\_\_\_\_
15. Resident State ➤ \_\_\_\_\_
16. Category Under Resident State as per PB.Govt. letter no.1/3/95-3PP II/9619 dated 06.06.1996 ➤ \_\_\_\_\_
17. Issuing authority for grant of Residence certificate ➤ \_\_\_\_\_
18. If seat allotted/joined in other state for admission to MBBS/BDS Course ➤ Yes  No
19. If yes, Name of the State allotted/joined for admission ➤ All India Counseling \_\_\_\_\_  
State/UT Counseling \_\_\_\_\_
20. Whether applied under NRI/OCI/PIO in centralized Counseling (Tick Yes/No) Yes  No

**UNDER TAKING / SELF DECLARATION BY THE CANDIDATE**

Certified that I \_\_\_\_\_ S/o Mr./Mrs \_\_\_\_\_  
resident of \_\_\_\_\_ do hereby undertake that:-

- That I am a citizen of India.
- That I have/had or have/had not (**strikeout nonapplicable**) obtained the benefit of Residence for admission in MBBS/BDS courses in any other State/UT except central counseling by MCC / DGSE.
- a) That I have/had been allotted/joined seat elsewhere in any other State/UT for admission to MBBS/BDS Courses, session 2019 in State Quota Counseling.  
Or  
b) That I have/had not been allotted/joined seat elsewhere in any other State/UT for admission to MBBS/BDS Courses, session 2019 in State Quota Counseling.
- That the above said information is true to the best of my knowledge and nothing is concealed therein. If at any stage, the information provided is found false/wrong, the admission of my son/daughter/ward is liable to be cancelled.

**Thumb Impression**  
(Left in case of male/Right in case of female)



**Signature of Candidate**

