Application From

BABA FARID UNIVERSITY OF HEALTH SCIENCES University Institute of Allied & Healthcare Sciences

 ${\it Common Admission Application Form for Admission to Post Graduate Degree / Diploma in Allied \& Healthcare Science Courses, Session 2025}$

	Healthcare Science Courses, Session 2025											
•	Form must be filled in BLOCK Letters only. Please tick (V) the appropriate box.											
<u>To</u>	be filled in BLOCK Lett	ers only								L		
1.	Course applied :											
	(i) :										_	
	(ii) :										_	
	(iii) :										_	
	Note : applicant will one course at a time											
2.	Category applied	:					Ca	tegory Co	de			
3.	Name	:										
4.	Father's Name	:										
5.	Mother's Name	:										
6	Date of Birth		D	D M	M	Y	Y	7. Sex (√) Male	Femal	e	
8.	Age (as on 31.12.20	25):		Years		Mont	hs		Days			
9.	Aadhaar No											
10.	Corresponde	ence Address	;									
	_Distric	ct		_State			Pin	Code				
	Mobile	No					.Mail					

11.	Permanent Address								
		DistrictState_	F	in Code					
12.	Annua	l Income of Parents from all sources:							
13.	Belong	gs to (V) Urban Rural Area							
14.		Detail of Marks in Q	ualifying Exam:						
Marks	s Obtaine	d in qualifying Exam	Max. Marks	Marks Obtained	%age	Year of passing	University/ Board		
Name		e:							
15. 16.	(As per Punjab Govt. letter No dated published in the prospectus.								
	 a) I hereby certify that the entries made by me in this form are correct to the best of my knowledge & belief and I have not concealed any information in any manner. b) I agree to observe and abide by all the rules and regulations of the Institution in which I may be admitted, including those with regard to programme of studies, syllabus, scheme of examination, examination rules, and I will not associate myself with any activity prejudicial to 								
the discipline of Institution. c) I fully understand that for any violation or infringement of these rules and regulations, disciplinary action can be taken against me by the authorities which may include cancellation of the candidature. d) I certify that I am not involved in any illegal activity and no criminal case is pending against me in any court of law.									
	 e) I certify that I have never been disqualified by any university/board. f) I undertake that if I am found to have indulged in ragging in the past or in future, my admission may be refused or I shall be expelled from the institution. 								
	g) I understand that if at any stage, it is found that I have provided any wrong information to seek admission, my admission shall stand cancelled automatically and I shall have no claim whatsoever, on the seat or the dues paid to the Institution.								
	h)	I certify that in case I leave the cou	•		urse fee.				
<u>Male</u>		numb Impression		FULL Sign	ature of t	he Candidat	e		
remuie	nigrit Till	ımb Impression		Date	!				

CHECK LIST (As applicable according to the course) (Attach Self Attested Copies Only)

Particulars	By Candidate	For Office use
Punjab Residence Certificate		
Matric or equivalent certificate for Date of Birth		
Detail Marks card of Graduation or any other qualifying exam		
as the case may be		
Degree of Graduation or any other qualifying examination as		
the case may be		
Migration Certificate		
Character Certificate		
Reserve Category		
Undertaking by the candidate for Gap year in original, if any.		
Undertaking from parent/Guardian		
Photocopy of Aadhar Card of candidate		
Bank Demand Draft(in Original)		
Passport size colour photograph, self signed by the candidate.		

Checked by (Sign)	
Name (