Price: Rs. 2500/-

Baba Farid University of Health Sciences Sadiq Road, Faridkot – 151203 (Pb) INDIA



<u>Application for obtaining</u> <u>Equivalency/ Provisional Eligibility Certificate</u>

| For Office use only: Received Rs./US\$ | | |
|--|--|--|
| Receipt No. | | |
| Dated | | |
| Casillei | | |

(For admission to MDS Courses under NRI quota for session 2024 only) (Fee for issuance of Eligibility Certificate: US \$ 1500 or equivalent in Indian Rupees to be sent by Demand Draft in favour of Registrar, Baba Farid University of Health Sciences payable at Faridkot.)

| (A) | (i) | Name Mr./Miss/Mrs. | : | | | |
|-----|---|------------------------------------|-------------|--|--|--|
| | (In capital letters) (ii) Father's Name | | : | | | |
| | () | (In capital letters) | | | | |
| | (iii) | Mother's Name | : | | | |
| | (iv) | (In capital letters) Date of Birth | ÷ | | | |
| | (v) | Admission being soug | | | | |
| | | (b) Year/Session | | | | |
| | (vi) | Country | Passport No | | | |
| B) | Full Address: | | | | | |
| | (Abro | 1) | | | | |
| | | | | | | |
| | Telep | phone No | Fax Number | | | |
| | e-mai | il address: | | | | |
| (C) | Full Address | | | | | |
| | (India | a) | | | | |
| | Telep | | Fax Number | | | |
| | e-n | nail address: | | | | |

| (D) 1. | Examination passed_ | | (B | DS or equivalent) in | the yearunder |
|----------|---|-------------------------|------------------|-------------------------|------------------------------|
| Roll | No | f | rom | the | University/Institution |
| | | | | as detaile | d below:- |
| | Prof. | Marks/Grade Obtained | Maximum Marks | No. of Attempts | |
| | $\frac{1^{\mathrm{st}}}{2^{\mathrm{nd}}}$ | | | | |
| | $3^{\rm rd}$ | | | | |
| | 4 th | | | | |
| | Total | | | | |
| Eligibi | llity : NEET | - | | | |
| 1. 2. | Whether NEET MD Whether Examination | | | ne University/College | Yes/No Yes/No |
| 3. | Name of the Universi | | | | |
| 4. | Whether the institution | | y DCI? | | Yes/No |
| 5. | (Please attach certific Whether University is | | OCI? | | Yes/No |
| | (Please attach proof) | | | | |
| (E) | Particulars of fee rem (i) Amount US \$ | | alent in India | n Rupees, and an am | ount of Rs.2500/- as Cost of |
| | Application fo | _ | | • , | |
| | Bank Draft No | 0 | Dated | Drawn on | |
| | Bank; payable | at Faridkot. | | | |
| NRI | Category under which | applying | | | |
| | | | - | propriate code) | |
| i) | Please fill in appropri | | • | the box. | |
| ii) | Candidates can apply | 0 | categories. | | |
| | The order of Preferen | | | | |
| | Category I : | | • | I to the State of Punja | |
| | Category II : | NRIs who origin | nally belonged | l to any state of India | other than Punjab. |
| Dated | | | | Signature of the App | licant |
| Dated_ | | | | Signature of the App | licant |

Enclosures:

| 1 | NEET-MDS -2024 admit card and result card | 7 | Certificate from the Principal of the institute showing the number of attempts in passing BDS/Equivalent Degree. |
|---|--|----|---|
| 2 | BDS/equivalent examination detailed marks certificate(s) and degree. | | Certificate of having passed qualifying examination as a regular student from the recognized institution /university. |
| 3 | Explanation Sheet of grades (if marks are not available) | | Recognition Certificate of BDS/Equivalent Degree from DCI. |
| 4 | Date of Birth Certificate. | 10 | Copy of NRI proof alongwith proof originally belonging to Punjab /or other Indian State |
| 5 | Character/Recommendation Certificate from the Head Of the Institution last attended | 11 | Registration Certificate of BDS/Equivalent Degree from DCI. |
| 6 | Internship completion certificate | | |

- Note:- 1. These documents should be original along with self attested Photocopies.

 2. Candidate seeking admission under NRI quota in Private Institutions/Private & Deemed Universities and Minority Institutions must have to qualify NEET MDS-2024.

| (For Office Use Only) |
|--|
| (i) He/She is NEET-MDS-2024 qualified under roll no scoring marks Percentile Rank |
| (ii) Qualifying examination passed, which is equivalent to BDS examination of Baba Farid University of Healt Sciences, as a regular student of |
| Sciences, as a regular student of Institution/University/College, which is recognized and affiliated with |
| University. This University/Institution is recognized one by Dental Council of India. (ii) Provisional Eligible for admission to |
| (ii) Hovisional Engine for admission to |
| (iii) Not eligible for admission since he/she |
| Jr. Assistant (Regn) |
| Supdt-I(Admission) |
| In-Charge (Admissions) |
| Registrar |