

MBBS ADMISSION APPLICATION FORM

Academic Year: 20____ – 20____

Application No.: _____

[Affix recent passport size photograph here]

SECTION 1 — PERSONAL DETAILS

Full Name (as per 10th certificate)	
Date of Birth (DD/MM/YYYY)	
Father's Name	
Mother's Name	
Gender	
Nationality	
Religion	
Category (Gen / OBC / SC / ST / EWS)	
Blood Group	
Aadhar Card No.	
Passport No. (if any)	
NRI Status	

SECTION 2 — CONTACT & ADDRESS DETAILS

Mobile No. (Student)	
Mobile No. (Parent / Guardian)	
Email Address (Student)	
Permanent Address	
Correspondence Address	
City	
State	
PIN Code	

MEDJAAK MEDICAL EDUCATION AND PLACEMENT PVT. LTD.

Recognized by MCI / NMC | Approved by Govt. of India

Country	
---------	--

SECTION 3 — ACADEMIC QUALIFICATIONS

Examination	Board/University	Year	Subjects	Max Marks	Marks / %
Class 10 (SSC/Matric)					
Class 11					
Class 12 (HSC/CBSE)					
NEET-UG					

SECTION 4 — NEET-UG ENTRANCE DETAILS

NEET-UG Roll Number	
NEET-UG All India Rank (AIR)	
NEET-UG Score	
Year of Appearing	
State Rank	
Category Rank	

SECTION 5 — CATEGORY & RESERVATION DETAILS

Category	☐ General ☐ OBC-NCL ☐ SC ☐ ST ☐ EWS ☐ PwD
Domicile State Quota	☐ Yes ☐ No
Caste Certificate No. (if applicable)	
Issuing Authority & Date	
EWS / PwD Certificate No. (if applicable)	

SECTION 6 — COURSE & COLLEGE PREFERENCE

1st Preference College / University	
2nd Preference College / University	
3rd Preference College / University	
Mode of Admission	☐ Government Quota ☐ Management Quota ☐ NRI Quota

MEDJAAK MEDICAL EDUCATION AND PLACEMENT PVT. LTD.

Recognized by MCI / NMC | Approved by Govt. of India

SECTION 7 — PARENT / GUARDIAN INFORMATION

Father's Occupation	
Mother's Occupation	
Annual Family Income (INR)	
Guardian Name (if applicable)	
Guardian Relationship	
Guardian Contact No.	

SECTION 8 — DOCUMENTS CHECKLIST (Attach Attested Copies)

S.No	Document Name	Enclosed (Y/N)	Verified By
1.	10th Marksheet & Passing Certificate	☐ Yes ☐ No	
2.	11th Marksheet	☐ Yes ☐ No	
3.	12th Marksheet & Passing Certificate	☐ Yes ☐ No	
4.	NEET-UG Admit Card & Score Card	☐ Yes ☐ No	
5.	Transfer Certificate (TC) from last institution	☐ Yes ☐ No	
6.	Character Certificate	☐ Yes ☐ No	
7.	Migration Certificate (if applicable)	☐ Yes ☐ No	
8.	Category / Caste Certificate (OBC/SC/ST/EWS)	☐ Yes ☐ No	
9.	PwD Certificate (if applicable)	☐ Yes ☐ No	
10.	Domicile / Residence Certificate	☐ Yes ☐ No	
11.	Aadhar Card (self-attested copy)	☐ Yes ☐ No	
12.	Passport size photographs (6 copies)	☐ Yes ☐ No	
13.	Medical Fitness Certificate	☐ Yes ☐ No	
14.	Anti-Ragging Affidavit (by student & parent)	☐ Yes ☐ No	

SECTION 9 — FEE PAYMENT DETAILS

Payment Mode	
Transaction / DD No.	
Amount Paid (INR)	
Date of Payment	
Bank Name & Branch	
Receipt No.	

SECTION 10 — DECLARATION & UNDERTAKING

MEDJAAK MEDICAL EDUCATION AND PLACEMENT PVT. LTD.

Recognized by MCI / NMC | Approved by Govt. of India

DECLARATION BY THE APPLICANT

I, the undersigned, hereby solemnly declare that all the information furnished in this application form is true, complete, and correct to the best of my knowledge and belief. I understand that if any information is found to be false or incorrect, my candidature/admission may be cancelled at any stage without notice. I also declare that I have read and understood all the rules, regulations, and eligibility criteria for admission to the MBBS programme and I agree to abide by the same.

Date: _____

Place: _____

Signature of Applicant: _____

Signature of Student	Signature of Parent / Guardian	For Office Use Only
Date: _____	Date: _____	Received by: _____ Date: _____ Stamp / Seal: _____