

A.M.C. DENTAL COLLEGE

Bhalakiya Mill Compound, Khokhra, Ahmedabad - 380008

1.STUDENT NAME:	CTUD		-		N 4 F	
SURNAME 				FATHER NA		
2. STUDENT PERMANEN						
PINCODE						
3. Reporting NO		Reporting DATE				
		12 [™] BOA				
4. GENERAL MERIT NO.		PHYSICS	CHEMISTRY	BIOLOGY	TOTA	
5. BIRTH DATE		PERCENTAGE				
6. 12 TH BOARD NAME						
7. 12 TH SCHOOL NAME_						
8. AADHAR CARD NO						
9. FEES RECEIPT PAID AT	Γ ADMISSION C	OMMITTE	E			
RECEIPT NO.	BANK NAME	RS	S.	DATE		
					_	
STUDENT SIGN	TUDENT SIGN PARENTS			DATE		
STUDENT SECTION	DY. DI AMC DENT	RECTOR	SE ANAC	DEAN DENTAL CO	ILLEGE	



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Full Name:					
Guardian Name:	Mother Name				
Addres <u>s:-</u>					
City:	_Pin code <u>:-</u>		_Gender:- M	lale/Fema	le
Date of Birth:	Rel	igion:		Minor	rity: - Yes/No
Admission Catego	ry:	Admissio	on Quota: - (GQ/MQ	PH:-Yes/No
Category	Cast:		Sub Ca	nst:	<u>.</u>
Student Email ID:-			_ Mobile	e No:	<u>.</u>
Parents Email I <u>D:-</u>		Mobile No:			<u>.</u>
Aadhar Number:-		Blood Group :			
NEET Roll No.:		NEET Perc	entile:	NEET S	core
ADMSSION Date:-	ADMSSION Date:ADMISSION Letter No				
HSC Seat No:-	HSC Passed Month &Year:-				
HSC Total Marks:-	HSC Tot	tal Percen	tage:	HSC Ti	rials:
Medium Board:					
Date:-				LATEST	
Student's Signatur	re:-			РНОТО	

Sr.		(Please write Yes/No in the
No.	List of Document submitted:	box for relevant Documents)
1	Passport Size Photograph (4 Copies)	
2	Copy of Admission Order of ACPUGMEC	
3	Copy of Tuition Fee Receipt/Freeship card	
4	Copy of NEET-UG 2023 Marksheet	
5	Copy of Std. 12 th Marksheet	
6	Copy of Std. 12 th Attempt/trial Certificate	
7	Copy of School Leaving Certificate/Birth Certificate/Transfer Certificate	
8	Aadhar Card Copy	
9	Copy of Caste certificate (If Applicable)	
10	Copy of Non-creamy layer certificate (If Applicable)	
11	Copy of EWS Certificate (If Applicable)	
12	Copy of Fitness Certificate	