

# ATAL BIHARI VAJPAYEE MEDICAL UNIVERSITY UTTAR PRADESH, LUCKNOW

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| ABVMUUP Enrollment No<br>(Student ID No.) |     |       |       |        |                            |        |        |        |        |                     |         |         |          |       |       |        |                   |          |        | o Spe                | less ti<br>cm<br>ctacle<br>lass |        |                     |       |      |
|   |     |       |       |        | f <b>er Mr</b><br>.te [Fir |        |        | ddle N | Jame.  | Last N              | Vamel   | (In En  | alish):  | (In C | APITA | ALS)   | <sup>r</sup> Do n | ot write | e Mr/N |                      | gnatu                           | ire of | the \$              | Stude | ent) |
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| 2.  | Fat | ther' | s Nar | ne: [F | First Na                   | ame, N | liddle | Name   | , Last | Name                | ](In Er | nglish) | : ( In ( | CAPIT | ALS)  | * Do i | not wri           | ite Mr/s | Shri   |                      |                                 |        |                     |       | ]    |

3. Mother's Name: [First Name, Middle Name, Last Name](In English): (In CAPITALS) \* Do not write Mrs/Smt

## (Is being permitted in the following Subjects)

1. Clinical Pharmacology 2. Clinical Microbiology 3. Basic Techniques of Anesthesia

(Seal & Signature of the Principal)

## Instructions to Candidates

- 1. Candidates will be allowed to enter the examination hall on production of Admit Card.
- 2. No candidate will be allowed to enter the examination centre 30 minutes after the commencement of the examination. Candidate will be allowed to leave the examination hall only after 2 hours of the commencement of the examinations.
- 3. Candidates shall sign the attendance sheet when directed by invigilator(s).
- 4. Candidates shall not be allowed to carry any textural material printed or written matter or bits of paper or any other material except the admit card inside the examination hall. Papers, cellular phones, Bluetooth devices or any electronic scanning/transmission device are prohibited in the examination hail.
- 5. Candidates who indulge in any misdemeanor shall be deemed as misbehavior and the defaulting candidates shall forfeit the right to continue in the examination hall. The decision of the Chief invigilator shall be final.
- 6. No candidate should leave his/her seat in the examination hall without the permission of the invigilator until he/she finally submits the answer booklet to the invigilator.
- 7. Candidate shall not leave any identification mark anywhere in the answer book. if any candidate put's any type of identification mark on the answer book, then it will be considered as use of unfair means and suitable action will be taken as per rules.



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# **EXAMINATION FORM**

(ABVMUUP Office) EXAMINATION OF ..... **BOTT** (Course Code:100) 4<sup>st</sup> Semester Exam Batch ..... (B.Sc in Operation Theatre Technology) **College Code** Name of College: Examination Center: **Examination Roll No** (Not to be filled by candidate) **ABVMUUP Enrollment No** (Student ID No.) Sir, It is requested to kindly allow me to appear in the following subject of the university examination for the year 2021-22 (For Office Use) Colored Photograph Not 01. Clinical Pharmacology less than 3.5 cm x 4.00 cm 02. Clinical Microbiology

03. Basic Techniques of Anesthesia

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|       | FRESH |



Form No:

## \*Example :- Do NOT Prefer Mr /Mrs / Miss

| 1. | Name of Candidate [First Name | , Middle Name, | Last Name](In English): | (In CAPITALS) | * Do not write Mr/Ms |
|----|-------------------------------|----------------|-------------------------|---------------|----------------------|
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## 2. Father's Name: [First Name, Middle Name, Last Name](In English); (In CAPITALS) \* Do not write Mr/Shri

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3. Mother's Name: [First Name, Middle Name, Last Name](In English): (In CAPITALS) \* Do not write Mrs/Smt

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Date (DD/MM/YYYY): \_\_\_\_

## (Signature of the Student)

Certified that the Photograph, signature and student record have been checked by college and is correct The student is allowed to appear in the examination as indicated above.

> Name of the Principal (Seal & Signature of the Principal)

(Counter Signature of Dean-ABVMUUP) (Medical/Dental/Nursing/Paramedical)