

ATAL BIHARI VAJPAYEE MEDICAL UNIVERSITY UTTAR PRADESH, LUCKNOW

EXAMINATION FORM

Form No: (ABVMUUP Office)

COURSE NAME MMLS H	ematology	& Blood	Bankin	ng (Cour	se Code	e:)1	st Seme	ster Exam	Batch		
		(Hemato	ology a	and Blo	od Baı	nking)					
Name of College:						Col	lege C	ode			
Examination Center:									LII	I	<u> </u>
Examination Roll No								(Not to	be filled by	y candidate	e)
ABVMUUP Enrollment No (Student ID No.)											
Sir, It is requested to kindly allow me to	appear	in the fol	lowing	ı subjec	t of the	universi	ity exam	nination fo	or the yea	ar 2024-2	5
		(Fe	or Off	ice Use)						
01. Fundamentals of Haematolog	IУ		A	LLOWE	D/ NSU	FRE	SH P	F			
02. General Pathology			A	LLOWE	D/ NSU	FRE	SH F	PF	Colored Ph		
03. Basic Medical Laboratory Mar	nagemen	nt	A	LLOWE	D/ NSU	FRE	SH F	PF th		x 4.00 cm	
04. Research Methodology & Bios	statistics		A	LLOWE	D/ NSU	FRE	SH F	PF	Face No than 2 No Specta Glas	2 cm acles or	
1. Name of Candidate [First Name,	Middle Nar	me, Last Na	ame](In	English):	(In CAP	PITALS)*	Do not v	write Mr/Ms			

2. Father's Name: [First Name, Middle Name, Last Name](In English): (In CAPITALS) * Do not write Mr/Shri

											1
											1
											1
											1

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

-		
		1 1
		1 1

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.



ATAL BIHARI VAJPAYEE MEDICAL UNIVERSITY UTTAR PRADESH, LUCKNOW

	ADMIT CARD	Serial No: (ABVMUUP Office)	
COURSE NAMEMMLS E	ematology & Blood Banking (Course Code:) 1 st Semester Exam Batch	
	(Hematology and Blood Bankin	ng)	
Name of College:	Co	ollege Code	
Examination Center:			
Examination Roll No ABVMUUP Enrollment No (Student ID No)		Photograph Not less than 3.5 cm x 4.00 cm Face Not less than 2 cm No Spectacles or Glass	
*Example :- Do NOT Prefer Mr /Mrs / Miss 1. Name of Candidate [First Name, N	iddle Name, Last Name](In English): (In CAPITAL	Signature of the Stud	ent)
2. Father's Name: [First Name, Middle	Name, Last Name](In English): (In CAPITALS) *	Do not write Mr/Shri	
3. Mother's Name: [First Name, Middl			1

(Is being permitted in the following Subjects)

1. Fundamentals of Haematology 2. General Pathology 3. Basic Medical Laboratory Management 4. Research Methodology & Biostatistics

(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 hall.
- 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.



ATAL BIHARI VAJPAYEE MEDICAL UNIVERSITY UTTAR PRADESH, LUCKNOW

ENROLLMENT FORM

Form No: (ABVMUUP Office)

С	DUF	SE	NA	ME		м	MLS	6 He	mato	ology	& F	Blood	l Baı	nking	g (Co	ours	e Co	ode:)	1 st :	Sen	neste	er Ex	am	Bat	ch			
										(He	mat	tolog	gy a	nd l	Bloo	od E	Bank	ing))									
Na	ame	of	Coll	ege	e :														Col	leg	e C	ode)	Γ					
	ude Applic		Regi	stra	atic	on N	lo. g	give	n b	y Co	olle	ege	:													otogra			
A			I <mark>P EI</mark> It ID I		lme	ent N	lo																		Face	i 3.5 c Not li pecta	ess tl	han	2 cm
	-							/ Miss ame,		le Na	me,	Last	Nam	ne](In	Engl	ish):	(In	CAPI	TALS	5)*I	Do n	ot wr	ite N	r/Ms					
Ī						_											-												
2.	Fat	her's	s Na	me:	[Firs	st Nar	ne, N	/iddle	Nam	ne, La	ast N	lame](In E	 Englis	sh): (In C	APIT	ALS)) * Do	o not	wri	te Mr	/Shri						
[
3.	Mo	her'	s Na	me	[Fir	st Na	me, I	Viddle	e Nar	me, L	ast I	Name	e](In	Engli	sh): (In C	CAPI	TALS) * D	o no	t wr	ite M	rs/Sn	nt	1				
Ī																													
4.	Gei	nder	: (Ma	ale/I	-em	ale/	Othe	ər) 5	5. C	Date	of	Birth	ח (DI	D/MM		Y)		6. l	Date	e of .	Adr	nissi	on t	o ab	ove	cours	se ([DD/N	/IM/YYY
_													/					[/								
7.	Cate	egor	y (Ur	/OB	C/SC	:/ST)		8.	Rel	igior	<u>ו</u>									9.	<u> </u>	onta	ICT N	lo (Ⅳ	lobile	e)			, , , , , , , , , , , , , , , , , , ,
																				+91	1								
10	. En	nail I	D(F	Plea	se \	write	ver	y cle	arly	in C	CAP	ΝΤΙ	L let	tters	onl	y)													
11	. Pe	rma	nent	Ado	dres	s				1	1																		
11	. Dis	strict										12.	S'	tate									13.	Piı	n Co	de			
											_											-							
																								L					
14	. Aa	dha	ar No)									_	15	. N	ame	e of	Sele	ectio	n B	oar	d Qu	alify	ing I	Exan	ו (eg	CET,	, etc)
]
															·	1	-1	1	1	1	-	-	-			· · ·			-
16	. Rol	No	of the	e Qu	alify	ring E	Exam	ninati	on																				
Da	ite (I	DD/M	MYY	YY):																				(Sigr	natur	e of t	the	Stu	dent)

Certified that the Photograph, signature and student record have been checked by college and is correct