

ATAL BIHARI VAJPAYEE MEDICAL UNIVERSITY UTTAR PRADESH, LUCKNOW

	A	Serial No: (ABVMUUP Office)						
COURSE NAME	MOTT (Course	Batch						
	(M.Sc. In Ope	ration Theatre T	echnology)					
Name of College:		e						
Examination Center:								
Examination Roll No		Photograph No than 3.5 cm x cm Face Not less the	4.00					
ABVMUUP Enrollment No (Student ID No)		No Spectacles						
*Example :- Do NOT Prefer Mr /Mrs 1. Name of Candidate [First Na		me](In English): (In CA	.PITALS) * Do not w ri	Signature of the	Student)			
2. Father's Name: [First Name,	Middle Name I ast Namel(I	n English): (In CAPITA	IS* Do not write M	r/Shri				
3. Mother's Name: [First Name,	Middle Name, Last Name](In English): (In CAPITA	ALS) * Do not write N	irs/Smt				
1. Anatomy 2. Physiology &	Biochemistry 3. Clinic		4. Clinical Pathol	Seal & Signature of the P				
		tions to Candi						

- 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.



ATAL BIHARI VAJPAYEE MEDICAL UNIVERSITY UTTAR PRADESH, LUCKNOW

EXAMINATION FORM

Form No: (ABVMUUP Office)

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	(M.Sc. In Operation Theatre Technology)																											
Name of College:									College Cod																			
Examination Center:																												
Examination Roll No																			1)	Not to	ot to be filled by candidate)							
ABVMUUP Enrollment No (Student ID No.)																												
lt i	Sir, It is requested to kindly allow me to appear in the following subject of the university examination for the year 2024-25 (For Office Use)																											
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Name of the Principal (Seal & Signature of the Principal)

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



ATAL BIHARI VAJPAYEE MEDICAL UNIVERSITY UTTAR PRADESH, LUCKNOW

	ENROLLI								_LM	MENT FORM								Form No: (ABVMUUP Office)										
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Certified that the Photograph, signature and student record have been checked by college and is correct