



BLDE

(DEEMED TO BE UNIVERSITY)

Declared as Deemed to be University u/s 3 of UGC Act, 1956

The Constituent College

SHRI. B. M. PATIL MEDICAL COLLEGE, HOSPITAL AND RESEARCH CENTRE

Smt. Bangaramma Sajjan Campus, B. M. Patil Road (Sholapur Road), VIJAYAPURA-586103. Karnataka, India.

Phone:08352-262770 (Ext-2329,2330), Fax: 08352-263303, website:www.bldedu.ac.in, e-mail:office@bldedu.ac.in

Application Form for Admission to B.Sc. in Medical Imaging Technology

Academic Year _____

Recent
Photograph
taken within 6
months

(FILL IN BLOCK LETTERS)

1	Name of the Applicant (As given in class SSLC/10 th Certificate)	
2	Father's/Mothers Name	
3	Gender	Male <input type="checkbox"/> Female <input type="checkbox"/> Trans Gender <input type="checkbox"/>
4	Date of Birth	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Day Month Year
5	Caste / Community (The certificate should be enclosed)	GM <input type="checkbox"/> OBC <input type="checkbox"/> SC <input type="checkbox"/> ST <input type="checkbox"/>
6	Address for Communication	
	City	
	PIN	
	District	
	State	
7	e-mail	
8	Telephones	
	(STD Code) - (Telephone No.)	
	Mobile No.	
9	Details of Demand Draft	
	D.D. No.	
	Amount in Rs.	Rs.500/-
	Date of Issue	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Day Month Year
	Name of the Bank	

10	Details of Education		(10+2) / PUC		
	Name of Board / University				
	Name of College				
	Month / Year of Passing				
11	Please enter the percentage of Marks scored in Qualifying exam (Please Don't enter % Symbol)				
Exam Passed	Name of the Board / University	Year of Passing	Class obtained & attempt of passing	Medium of instruction	% of marks obtained in aggregate of all subjects
SSLC / Equivalent					
10+2 / PUC / Equivalent					
Any other					

DECLARATION BY THE CANDIDATE

1. I, Mr. / Ms. _____ hereby affirm that the information furnished by me in this application and the enclosures are true. I know that the information furnished by me is untrue, my seat will be forfeited.
2. I will not indulge in any form of ragging. I know it is a criminal offence and if found guilty, I will be summarily dismissed. I undertake to make good the loss caused to the college/staff/student or any other person caused by any illegal act of mine.
3. I am liable to pay the balance of fees calculated for the entire course, in case I discontinue the course or I am expelled from the college for any reason.
4. I shall abide by all the rules and regulations of the college that may be framed from time to time.
5. In all matters regarding my admission to UG course, the decision of the college is final and binding on me.

Left thumb Impression of the Applicant

Place: _____

Date: _____

Signature of the Applicant

DECLARATION BY THE GUARDIAN

1. I, Mr. / Ms. _____ hereby affirm that the information furnished by my Son's/Daughter's/Ward's application and the enclosures are true. I know that the information furnished by my Son's/Daughter's/Ward's is found to be untrue, his/her seat will be forfeited.
2. I know ragging is a criminal offence and shall take steps to prevent my Son's/Daughter's/Ward from indulging in it. I also know that if he/she is found guilty of the offence, he/she will be summarily dismissed from the college. I undertake to make good the loss caused to the college/staff/student or any other person caused by any illegal act of my Son's/Daughter's/Ward.
3. I am liable for payment of the balance of fees calculated for entire course, in case my Son/Daughter/Ward discontinues the course or is expelled from the college for any reason.

4. I am also aware that once the candidate is admitted to the course, no refund of fees either in full or part thereof will be made, for any reason.

Place: _____

Date: _____

Signature of Parent/Guardian

Please Note: List of enclosures to accompany the application form (Certified Photo Copies)

- a. SSLC / Equivalent Examination Marks Cards.
- b. PUC / Equivalent Examination Marks Cards.
- c. Transfer Certificate.
- d. Migration Certificate issued by the Board/University in case of candidates coming from outside Karnataka State.
- e. Conduct/Character Certificate issued by the college last studied in.
- f. Photo identity (i.e. Passport/Voter Card/ Pan Card/ Driving License).
- g. Three passport size photographs of which one to be affix to the application form in the space provided.

