



KEMPEGOWDA INSTITUTE OF MEDICAL SCIENCES

{Affiliated to RGUHS, Karnataka & Recognised by MCI New Delhi}
BANASHANKARI 2ND STAGE, BENGALoorU – 560 070.
KARNATAKA STATE - INDIA

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Affix recent
passport size
color
photograph of
the candidate

APPLICATION FOR ADMISSION TO I M B B S COURSE FOR THE YEAR

20__ - 20__

Receipt No. _____

Date _____

Application No. _____	COMEDK/CET/KRLM Reg.No Attach Xerox copy	COMEDK/CET/KRLM RANK Attach Xerox copy
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STUDENT'S PERSONAL DETAILS

1. NAME OF THE CANDIDATE (Block Letters)				
2. AGE & DOB:/		Sex: Male/Female	3. FATHER/GUARDIAN NAME	
4. OCCUPATION OF FATHER/MOTHER/GUARDIAN				
5. PERMANENT ADDRESS			POSTAL ADDRESS	
PIN CODE			PIN CODE	
Ph : Residence Office		Cell	E-mail	
6. ANNUAL INCOME OF PARENTS FROM ALL SOURCES Rs.				
7. MOTHER TONGUE			8. NATIVE PLACE	
9. STATE		10. NATIONALITY		11. BLOOD Gr
12. RELIGION:			13 CASTE-SC/ST/OBC/GM Attach xerox	
14. NAME OF THE QUALIFYING EXAMINATION				
a. NAME & ADDRESS OF THE COLLEGE LAST STUDIED.				
b. BOARD OF EXAMINATION			Medium of Instruction	
c. REG.NO.IN THE QUALIFYING EXAMINATION			d. YEAR OF PASSING	
e. MARKS OBTAINED IN QUALIFYING EXAM, II P U C OR ITS EQUIVALENT			{Attach Xerox copy of marks card}	
SL. No.	SUBJECTS	MAX. MARKS	MARKS OBTAINED	PERCENTAGE
01	PHYSICS			
02	CHEMISTRY			
03	BIOLOGY			
TOTAL				
f. REG.NO.IN THE QUALIFYING EXAMINATION			g. YEAR OF PASSING	
h. TOTAL MARKS OBTAINED IN QUALIFYING EXAMINATION IN ALL SUBJECTS				
SL. No.	SUBJECTS	MAX. MARKS	MARKS OBTAINED	PERCENTAGE
01	ENGLISH			
02	KANNADA/HINDI/SANSKRIT			
03	PHYSICS			
04	CHEMISTRY			
05	BIOLOGY			
06	MATHEMATICS			
TOTAL				

DECLARATION

I declare that the information furnished above are true to the best of my knowledge, information & belief. In case the above said information are found to be false, this application for admission is liable to be rejected and fees forfeited.

PLACE:
Date :

**NAME & SIGNATURE
OF THE PARENT/GUARDIAN**

**NAME & SIGNATURE
OF THE STUDENT**

FOR OFFICE USE ONLY

The Applicant Mr./Ms. _____ has been provisionally admitted to 1st yr M B B S for the academic year _____.
Fee remitted Rs. _____ Vide Receipt/Challan No. _____
Dated _____ Admn No. _____.
Towards the fee for 1st year M B B S.

His/Her statement of marks, age, Date of Birth, & N R I /Foreign National status {Wherever applicable} are verified and found correct.

ADMISSION SUPTD.,

CASHIER

MANAGER.

PRINCIPAL

Enclosures to be submitted at the time of admission.

01. CET/COMEDK allotment letter.
02. CET/COMEDK rank card.
03. Eligibility Certificate issued by Rajiv Gandhi University of Health Sciences.
04. Tenth standard SSLC & 12th standard/ P U C Marks cards.
05. Transfer Certificate.
06. Migration Certificate.
07. SC/ST/OBC/ certificates wherever applicable.
08. Three passport size photographs.
09. Declaration.
10. Three sets of Passport & VISA Xerox copies in case of N R I /Foreign students.