

Application Form for Late Dr. APJ Abdul Kalam Scholarship Examination -2022-23

Name of Candidate	(IN CAPITAL LETTERS	<u>5):</u>			
					Affix recent colour Photo
SURNAME	FIRST NAME	MIDDLE NAME	3		
Residential Address	:				
Email ID:		Mob:	WI	hatsapp No)
Blood Group		Adhar Card No:			
Date of Birth (dd/m	m/yyyy)/_] Male [] Female	;
Name of Constituen	t college/institute				
Total Marks obtaine	d in HSSC (XII Std.) & NEET:			
Subject	HSC	,	NEET-2022]
Physics					-
Biology					-
Chemistry					1
English					1
Agregate Total					
Percentage					
Awards /Achieveme	ents:				
Signature of Candida		in by the Heads of the	e institute)		
Certify that Dr. /Mr	:/Ms.		is 1	the studen	t of Constituent Uni
	., 1110.				mentioned herein in
verified as per recor	rd available at the ins	titute.			
	Signature Head of the Institute				
Note: Please attach	HSSC Mark Sheet wit	th this application for	<u>m.</u>		

- Formerly known as Datta Meghe Institute
 of Medical Sciences (Deemed to be University)
- Conferred 'A' Grade status by H.R.D. Ministry Govt. of India
- Re-accredited by NAAC (3rd Cycle) with 'A+' Grade

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