Full Name as per 10 th Mark sheet only	Clear Scanned Photograph with white background to be affixed here using MS Words tool.
Enrolment Number	
Mother Name:	
Father Name:	
Gender	
Course	
Batch	
Department (to be filled by PG's/M.Sc./MPH/Ph.D only)	
Address Permanent	
Mobile Number	
Emergency Cont. No:	
Blood Group	
Date of Birth	
Email ID	
Date of Admission	
Validity	(To be filled by office)

After filling the details kindly mail the above information to: drakhtarhimsr@gmail.com