# ADMISSION FORM

**INDEX NO: 02/02**

## PURBA MEDINIPUR MEDICAL COLLEGE OF ELECTROHOMEOPATHY

**Mecheda, Santipur Netaji Polli, Purba Medinipur, PIN - 721137, West Bengal**

(Affiliated to Central Council Of Electro Homeopathic System of Medicine, W.B.)

PHOTO

To,
The Principal,
P. M. Medical college of Electrohomeopathy
Mecheda, Santipur Netaji Polli,
Purba Medinipur, PIN-721137, W.B.

Sub: - Application for seeking Admission for D.M.S.E.H. course.

Sir,

I am a candidate for admission in your college pursues the D.M.S.E.H. (Diploma in Medicine & Surgery in Electro-Homeopathy) course. (3 years academic & 6 months Internship). I shall strictly abide by the rules and regulations of the college.

My bio-data along with eligibility documents as required are furnished below.

1. Name of the candidate .....
2. Father's / Guardian's Nam.....
3. Permanent Address.....
.....

4. Phone No: ..... 5. Nationality ..... 6. Caste: .....
7. Date of Birth: ..... 8. Sex..... 9. Qualification: .....
10. Aadhaar no: ..... 11. Email ID: .....

With best regards,
Date ----------

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Signature of Applicant

Office Use

*Name:* .....

*Roll No* .....

.....
*Signature of office clerk*

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*Signature of Principal*