

**CHRISTIAN MEDICAL COLLEGE LUDHIANA SOCIETY**APPLICATION NO.
(For office use only)**APPLICATION FOR BIBLE TEST – MBBS/BDS 2022
'CHRISTIANS WITH SERVICE COMMITMENT CATEGORY'**STAPLE THREE
PASSPORT SIZE
PHOTOGRAPHS

FILL IN DETAILS IN CAPITAL LETTERS ONLY

NAME OF APPLICANT (Full name as in Matriculation certificate)

NEET DETAILS

ROLL NUMBER	MARKS	ALL INDIA RANK

BFUHS REGISTRATION ID (If not registered at time of submission of this form, update, as soon as it is received, by email to registrar@cmcludhiana.in)**PERSONAL DETAILS**

NAME OF FATHER:			
NAME OF MOTHER:			
DATE OF BIRTH :		GENDER: MALE / FEMALE (Please Circle / Tick)	
RELIGION: CHRISTIAN		MEMBER OF WHICH CHURCH:	
DURATION OF MEMBERSHIP:		DATE OF BAPTISM:	
STATE OF DOMICILE:			
CORRESPONDENCE ADDRESS:			
TELEPHONE NO.	RESIDENCE (WITH STD CODE)	MOBILE	ALTERNATE
EMAIL ID:			
COURSE APPLYING FOR (Please tick)		MBBS	BDS
NAME OF CHURCH/MEMBER BODY WITH WHOM THE CANDIDATE IS SIGNING THE SERVICE AGREEMENT WITH		MBBS:	
		BDS:	

COURSE	CATEGORY THE CANDIDATE IS APPLYING IN (Refer to the Footnote & Circle the appropriate category, as per eligibility)						
	2A	2B	2C	2D	2E	2F	2G
MBBS							
BDS							

Foot Note : **A** - Punjab ; **B** - Andhra Pradesh, Karnataka, Kerala, Puducherry, Tamil Nadu, Telengana; **C** - Goa, Maharashtra, Gujarat, Daman & Diu, Dadra & Nagar Haveli, Rajasthan, Lakshadweep; **D** - Madhya Pradesh, Chhatisgarh, Orissa, Jharkhand, West Bengal, Andaman & Nicobar Islands; **E** - Uttar Pradesh, Bihar, Uttarakhand, Arunachal Pradesh, Assam, Meghalaya, Manipur, Mizoram, Nagaland, Sikkim, Tripura ; **F** - Jammu & Kashmir, Ladakh, Himachal Pradesh, Delhi, Haryana, Chandigarh; **G** – **Service Commitment with CMC Ludhiana & Its Outreach Centers. Candidates applying in the 2G category should have their forms endorsed by the Director, Christian Medical College Ludhiana.**

ACADEMIC DETAILS

	BOARD	YEAR OF PASSING	STATE FROM WHERE COMPLETED	RESULT (CGPA/PERCENTAGE)
X STD				
XI STD				
XII STD				

TRANSACTION DETAILS

BANK NAME	DEMAND DRAFT – in favour of ‘Christian Medical College Ludhiana Society’, Payable at Ludhiana. (Amount: Rs.2000/-)	
	Number	Date

DECLARATION

I hereby declare that I have read the Instructions in its entirety

I hereby declare that I am an Indian National

I understand that the Application Fee once paid is not refundable. I hereby declare that the Information provided by me is true and correct to the best of my knowledge. I further declare that I will provide the original of all certificates, relevant to the claims made by me, at the time of admission. I agree to forfeit my claim to admission in the event any information provided by myself is found to be false or I am unable to produce the relevant original certificates.

ENCLOSURES : Copies of: 1. Church Membership Certificate (As per format) ; 2. Baptism Certificate ; 3. Domicile Certificate; 4. Letter of Service Commitment (from Church/Member body of CMC Ludhiana Society with whom signing the Service Agreement and signed by Authorized Signatory only). 5. NEET Score Card (if received). Scan the form , enclosures and send by mail to registrar@cmcludhiana.in by 7th December 5.00 PM (Refer to UG MBBS BDS 2022 Information Bulletin for details)

Ensure this form with enclosures reaches the Office of the Registrar, CMC Ludhiana , PIN 141008, Punjab by Courier/ by hand

NAME

SIGNATURE

DATE

SAMPLE
CHURCH MEMBERSHIP CERTIFICATE
(This information is for MBBS/BDS Admissions 2022-CMC, Ludhiana.)

Name of the Candidate Date:.....

Date of Birth:.....

Father's Name:.....

Mother's Name:.....

Address:.....

This is to certify that, as per our church records, Mr./Ms..... is a member of our Church from.....till..... He/She is communicant/non-communicant member.

Name of the Church:.....

Address of the

Church:.....

Telephone No:..... E mail address:.....

Name of the Presbyter* Incharge of the Church:

Address:.....

Telephone No:..... Mobile No:.....

E mail address:.....

Head of the Church**:.....Telephone No.....

Head Office of the Church

(Address).....

Signature of Pastor/Presbyter* Incharge of the Church
with official seal & date

Verified the Signature & details of the Presbyter-in-charge of the Church

Signature of Head of the Church**:
with official seal & date

* Presbyter / Minister / Reverent / Pastor / Vicar

** Bishop / Senior Presbyter / Senior Pastor / Senior Minister

(It is important to have both signatures with the particulars, otherwise it is not valid)