

NATIONALITY

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EDUCATIONAL / QUALIFICATION

EXAM PASSED / APPEARED	BOARD / UNIVERSITY	YEAR	SUBJECT	MAX. MARKS	MARKS OBTAINED	% OF MARKS
			PHYSIC			
			CHEMISTRY			
			BIOLOGY			
			TOTAL			
			ENGLISH			

DETAILS OF DEMAND DRAFT

D.D. NO.									
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DATE						
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NAME OF THE BANK OF D.D.

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BRANCH AND CITY

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NAME OF TEST CITIES

CENTRE	CENTRE CODE	CENTRE	CENTRE CODE
AHMEDABAD	01	JABALPUR	06
BHOPAL	02	JAIPUR	07
DELHI	03	RAIPUR	08
INDORE	04	LUCKNOW	09
GWALIOR	05		

DECLARATION: I hereby declare that all the particulars stated in this Application Form are true to the best of my knowledge and belief. I have read and understood all provisions of admission and agree to abide by them. I also affirm that I fulfill the eligibility requirements for the course/s applied. In event of submission of fraudulent, incorrect or untrue information or suppression or distortion of any fact like educational qualification, marks, nationality etc. I understand that my admission / degree is liable for cancellation. **I further understand that my admission is purely provisional subject to the verification of the eligibility conditions.**

.....
SIGNATURE OF PARENT / GUARDIAN.....
SIGNATURE OF APPLICANT

:-: चेतावनी :-:

एसोसियेशन ऑफ प्राइवेट डेंटल एवं मेडीकल कॉलेज मध्यप्रदेश की सम्पूर्ण भारतवर्ष में अन्य कोई ब्रांच नहीं है संस्था का कोई भी अधिकारी/कर्मचारी कार्यालय के बाहर जाकर काम नहीं कर सकता और ना ही नियमविरुद्ध प्रवेश दिलाने का अधिकार रखता हैं । ऐसे में अगर कोई व्यक्ति/एजेंसी/संस्था हमारी संस्था का प्रतिनिधि होने का दावा कर एसोसियेशन ऑफ प्राइवेट डेंटल एवं मेडीकल कॉलेज के पक्ष में प्रवेश के नाम पर किसी छात्र/छात्राओं/अभिभावको से आवेदन पत्र प्राप्त करें अथवा छात्र/छात्राओं/अभिभावको को डेंटल/मेडीकल कॉलेज में प्रवेश देने का आश्वासन दे, ऐसे व्यक्ति/एजेंसी/संस्था अवैध गतिविधियों द्वारा छात्र/छात्राओं/अभिभावको को गुमराह कर जालसाजी कर सकते है ऐसी अवैध गतिविधियों के लिए एसोसियेशन ऑफ प्राइवेट डेंटल एवं मेडीकल कॉलेज किसी भी प्रकार से उत्तरदायी नही होगा ।

प्रदेश के निजी चिकित्सा/दंत महाविद्यालयों में डीमेट कोटे की सीटों पर प्रवेश एसोसियेशन ऑफ प्राइवेट डेंटल एवं मेडीकल कॉलेज मध्यप्रदेश द्वारा आयोजित डीमेट परीक्षा में प्राप्त मेरिट के आधार पर सैन्ट्रलाइज कॉउंसिलिंग के माध्यम के द्वारा ही होंगे। मेडीकल/डेंटल कॉलेजों में प्रवेश हेतु इच्छुक छात्र/छात्राओं/अभिभावको को चेतावनी दी जाती है कि वे किसी अवैध गतिविधियों में न पड़े एवं जालसाजों से बचे अन्यथा वे स्वयं उत्तरदायी होंगे।

Important Caution

Association of Private Dental and Medical Collage (APDMC), Madhya Pradesh do not have any other Branch Office all over India. The employees of APDMC are not allowed to work outside the office nor they have any right to secure admission against the rules. Any person /agency / institution claiming to be representative of the Association of Private Dental and Medical Collage and assuring to secure admissions in Private Medical and Dental College either through influence or by use of unfair and unethical means could be touts / agents / racketeers trying to deceive by false promises to secure admissions. The APDMC is not responsible for any such illegal activity.

Admissions to DMAT Quota in Private Medical / Dental Colleges of the State through DMAT Examination conducted by the APDMC are through centralized Counseling based purely on merit. Candidates aspiring for admissions in Private Medical / Dental College are advised to beware of unscrupulous elements and do not fall in their trap or else they will be solely responsible.

IMPORTANT INSTRUCTION

1. The candidates are advised before filling up the form to ensure that they fulfill All the eligibility and qualifying conditions with respect to qualification etc. for Admission to the course applied for.
2. The candidates are required not to attach/enclose any document with the Application Form. They shall be required to produce the same at the time of Counseling.
3. The Association shall not be responsible for the Application Form lost in transit And or received after due date and in mutilated/turn condition. No correspondence shall be entertained in this respect.
4. Incomplete Application Form Will be rejected.
5. Read instructions given in the Prospectus carefully.

CHECK LIST:

1. Application Form has been filled up correctly and signed at desired places.
2. Demand Draft (CTS DD Only) of Rs. 3000/- in favour of APDMC, Bhopal has been enclosed with Application Form.
3. No certificate has been submitted along with Application Form.
4. Latest colored photograph has been pasted as per instructions.
5. Photocopy of the Application Form has been taken and kept for future references.
6. Declaration column has been signed by the candidate and parent/guardian.
7. Left Thumb impression with Blue/Red stamp pad ink has been taken.

POSTAL ADDRESS:

To,

The Controller of Examination
DMAT – OFFICE
E-2/51, ARERA COLONY,
OPPOSITE HABIBGANJ RAILWAY STATION
BHOPAL -462016 (M.P.)