

APPLICATION FORM BDS Course

(To be filled in by the applicant own handwriting clearly and carefully)

To, The Principal Daswani Dental College & Research Centre Kota (Rajasthan)

Sir,

I wish to apply for admission in BDS Course at Daswani Dental College & Research Centre, Kota (Rajasthan).

PERSONAL DATA	1							
Name of Candidate							_	
Father's Name							_	
Mother's Name							_	
Date of Birth	Sex							
Category	Religion							
Nationality	Contact No. (Parents)							
Contact No. (Student)	e-mail							
Permanent Address	District		State	;			PIN	
	7.1.1							
State UG Couns	eling Seat A	Allotment Detail						
Reg. ID	State Merit No.							
Allotment No.		Seta allotted in Round 01 / Round 02 / MOPUP-01 / MOPUP -02/Ot			OPUP -02/Other			
DETAIL OF QUAL	IFYING EXA	MINATION PASS	SED	-		-		-
Name of Examination	Year of Passing	Board/ University	Optiona	l Subjects		Marks in Sci	ence Subject Marks Obtained	% Marks
Intermediate		,	Physics					
Examination			Chemis	try				
[10+2 year course]			Biology					
			English					
			Total Ma	arks				

INSTITUTIONS AT THE APPLICANT STUDIED DURING LAST FIVE YEARS				
S.No.	Institution	Class	Year	State
01.		ΧI		
02.		Х		
03.		IX		
04.		VIII		
05.		VII		

	Declaration	
l,	S/D of	
age		
1. 2.	That the particulars furnished by me in this application form are correct to the best of my kn That I undertake and bind myself to pay all fees, charges, etc., which the institution may le due date and in the event of failure to do the same, the Principal, Daswani Dental College take necessary action as deemed fit against me.	vy from time to time by the
3.	That I will never claim any refund of the deposited Tuition Fee/ Caution Money/ Registra Course with Daswani Dental College & Research Centre, Kota, Authorities under any circ join/continue the course for any reason whatsoever.	
4.	That in the event of discontinuation of the course by me for any reason, I shall be legally lift for the entire remaining duration of the course, failing which, my original documents shall be liable to legal action by the college authorities.	
5.	That I shall not lodge any complaint in any regard to any Government Officials or file any any Court of Law to the same effect.	Civil or Criminal lawsuit in
6.	That I agree and confirm that I shall abide by the rules and regulations as prescribed enforced by Daswani Dental College & Research Centre, from time to time, and ensure the unacceptable activities mentioned therein.	
	I am signing this Declaration form after carefully reading the above mentioned clauses in s external pressure.	ound mind & without any
	Place:	Date :
	Signature of Candidate	Signature of Parents

Declaration by the Applicant

- I declare that entries made by me in this Application Form are true and correct in all respects and in case of any entry or information given by me in this form is found to be false, this shall entail automatic cancellation of myadmission besides rendering me liable to such action as the University may deem proper.
- I have noted that my admission to the College and my continuance on its rolls are subject to the provisions of the University and other rules and instructions as may be applicable from time to time. I also undertake that I shall abide by the rules of discipline and proper conduct as are applicable from time to time.

Full Si	gnature	of Candidate
Date -		

- Admission of My Ward is provisional.
- Non Submission of Bank Guaranty/Cash Security before...... Admission of my ward will be cancelled automatically.
- I Solemnly affirmed that aforesaid facts are true to my Knowledge.
- In case of any dispute jurisdiction in Kota, Rajasthan only.

Full Signature of Parents
Date

Documents to be submitted for Admission

- 01. Allotment Letter of State UG Counseling Board
- 02. NEET Score Card
- 03. Mark sheets of 10,11 & 12 Std.
- 04. Transfer Certificate & Character Certificate
- 05. Migration Certificate (Other than Rajasthan Board)
- 06. Caste Certificate (For other than Gen Catg.)
- 07. Bank Guarantee/ Cash Security
- 08. Passport Size Photograph (10)
- 09. Aadhar Card / Passport / Election Card
- 10. Affidavit (From student and Parents)