



# JOINT ACADEMIC PROGRAMME BIOMEDICAL INSTRUMENTATION (BMI)

University of Calcutta and West Bengal University of Health Science

Website(s): [www.caluniv.ac.in](http://www.caluniv.ac.in), [www.wbuhs.ac.in](http://www.wbuhs.ac.in), [www.wbhealth.gov.in](http://www.wbhealth.gov.in)

Phone: 033 -2350 8386, 033-2321 3461; E-mail: [bmi\\_jap@hotmail.com](mailto:bmi_jap@hotmail.com)



University of Calcutta

## Form of Application for Admission to M.Sc. Course, 2015 –'17

Selection No. ----- Roll No. -----

- A. 1. (a) Full Name..... (b) M/F.....  
(in block letters) (Surname) (First name)
- (c) Nationality..... (d) SC/ST/PH.....
- (e) Date of Birth.....
2. (a) Father's/Guardian's Name.....
- (b) Occupation.....
- (c) Office Address.....  
..... (f) Tel. No./Fax.....
3. Mailing Address.....  
..... PIN..... Tel. No.....
4. Permanent Address.....  
..... PIN..... Tel. No.....
- B. University Registration No..... of .....
- (if already a student of Calcutta University)

3. \*Academic Qualification:

Sl No.	Year (in descending chronology)	Degree	Institution	Board/University	Major Subjects Combination	(Aggregate Marks obtd. Total marks)

\*Photocopies of duly attested relevant supporting documents are to be submitted along with the Application Form and the originals of the documents are to be produced at the time of submission to **“Science News Association”, 92, APC Road, Kolkata -700009**

C. Name of Bank ..... DD No. .... Date .....  
 Amount Rs.....

D. Declaration :

1. By Applicant:

If any of the above statements are found to be incorrect, or if it is found that I have in any way contravened the provisions of the rules and regulations relating to eligibility for prosecuting studies at the Post-Graduate Class or relating to eligibility for taking the University Examination after such studies, my admission will be liable to be cancelled and I shall not be entitled to refund of fees paid by me. Also, I bind myself to abide by the code of conduct and discipline as may be enforced by the authorities from time to time.

Signature (in full)..... Date.....

2.By Father/Guardian ;

I certify that the above statements are true.

Signature (in Full)..... Date.....

Photo copies of duly attested supporting documents along with the hard copy of application form are to be produced at the time of submission to ‘Science News Association’,92 A.P.C Road,Kolkata-700009(Only Thrusday & Friday 1.00 pm to 3.00 pm) after 14 th July 2015.

- Application Fee deposit to the Bank of Baroda ,Extn counter Surya Sen Street, Bank A/C No: 982100100001618 ,92 A.P.C Road ,Kolkata-700009.
- Forms available till:31/07/2015
- Last Date of Receipt: 31/07/2015      \*Interview Date: 19/08/2015