

UNIVERSITY OF PUNE

Price : Rs. 30/-
FRESH / REPEATER

FIRST / SECOND / THIRD



[Form should be filled in CAPITAL Letters]

Examination For the Degree of Ayurvedacharya (B.A.M.S.) for the year Oct./April 20 .

To

The Controller of Examinations,
University of Pune, Pune-411007

Sir

I request permission to present myself at the ensuing First / Second / Third Examination for the degree of B.A.M.S.

FOR OFFICE USE ONLY		Batch No.				
		Sr. No.				

1. Appearing Year of examination

I	II	III
1	2	3

 Whether availing the benefit of A.T.K.T. Yes ☐ No ☐
2. Name of the College College Code

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3. Name of the Centre Centre Code

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4. Name of the Candidate
(In Capitol) (Surname) (Name) (Father's/Husband's Name)
(Enter as per your School Leaving Certificate)
Mother's Name :

4 (i). Name in Devnagri Script

5. SexCode

M	F
1	2

 6. Permanent Registration Number

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7. No. of Courses Tick Marked

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8. Regular / External

R	E
1	2

 9. Fees Paid Rs.

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The student is requested to attach the Xerox Copy of the Statement of Marks of the latest examination/ or attempt.

Yours faithfully,

(Signature of Candidate)

Address for Correspondence :

..... Mobile No.

DECLARATION

- I hereby declare that I shall not claim any concessions on religious ground
- I have not appeared for the said exam more than Six Occasions.
- I hereby declare that I have gone through the syllabus prescribed for the exam for which I am appearing.
- I shall be responsible for any errors and wrong or incomplete entries made by me in the Examination Form.

Place

Dale

Signature

(2)

B.A.M.S.

Tick ☒ only for the subjects candidate want to appear,

First Exam. of B.A.M.S.

1. ☐ (10101} Sanskrit
2. ☐ (10201) Ashtang Sangraha
3. ☐ (10301) Ayurved Itihas
4. ☐ (10401) Padarth Vidnyana
5. ☐ (10501) Sharira Rachana
6. ☐ (10601) Sharirakriya Vidnyana

Second Exam. of B.A.M.S.

1. ☐ (20101) Dravyagun Vidnyan
2. ☐ (20201) Rasashastra and Bhaishaj Kalpana
3. ☐ (20301) Rog Vidnyan and Vikruti Vidnyan
4. ☐ (20401) Swastha Vritta
5. ☐ (20501) Agadtantra and Vyavahar Ayurved
6. ☐ (20601) Charak Samhita (Purvardha)

Third Exam. of B.A.M.S.

1. ☐ (30101) Prasuti Tantra AVM Stree Roga
 2. ☐ (30102) Kaumar Bhritya
 3. ☐ (30103) Kayachikitsa
 4. ☐ (30104) Shalya Tantra
 5. ☐ (30105) Shalakya Tantra
 6. ☐ (30106) Charak Samhita
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(3)

B.A.M.S.

[Certificate to be signed by the Principal of the College, at which the candidate has studied.]

I certify that Shri/Shrimati

- I. after his/her passing the XII Standard Examination has attended for the number of days specified below (attended during two terms the courses in Theory and Practicals in all the prescribed subjects) to my satisfaction :

Terms	Number of days on which lectures were delivered	No. of days attended	Remarks
From June 199 to Oct. 199			
From Nov. 199 to March 199			

2. is to the best of my knowledge and belief, a person of good conduct and has my permission to appear at the ensuing examination for the Examination for the Degree of Ayurvedacharya (B.A.M.S.)

Place :

Signature

Date :

Principal College

OR

I certify that Shri./Smt. failed to pass the First Ayurvedacharya (B.A.M.S.) Examination in 19 , and that during the interval between the declaration of his/her failure and the date of this application, he/she has pursued a further course of study in the subject of examination to my satisfaction.

Place :

Signature

Date :

Principal College