

Association of Combined Entrance Examination (ACEE)
Application form for MD Ayurveda 2017

Order of preference of Course Specialty:

MD Maulik Siddhant :

MD Swasthvritta :

MD Agad Tantra :

MD Dravyaguna :

MD Panchkarma :

MD Rachna Sharir :

MD Kriya Sharir :

(please fill number as per preference of 1st, 2nd etc.)

MD AYURVEDA -2017
(for office use)

Roll No. :

Form No.

Application FEES

Receipt No :

Recent Photograph
of Candidate

Candidate Name:

Father's Name:

Mother's Name:

Complete Address:

..... Pin:

1. Mobile No. : 2. Mobile No. :

Email ID: D.O.B (DD/MM/YYYY) :

Detail of Eligibility Qualification

Intermediate Exam (10+2): Marks in Physics, Chemistry, Biology :Out of :

Intermediate Exam (10+2): Marks in English : Out of :

% age of Marks in PCB in Intermediate Exam (10+2) :

Name of College (qualified BAMS)

Name of University :

Year of Passing Bams

Marks obtained in BAMS 1st Prof. : Out of :

Marks obtained in BAMS 2nd Prof. : Out of :

Marks obtained in BAMS 3rd Prof. : Out of :

Marks obtained in BAMS 4th Prof. : Out of :

Grand Total (Marks Obtained) BAMS: Out of :, %age (BAMS)

Student's/Representative's Signature:

Date :

Place :