

## ANNA MEDICAL COLLEGE **MAURITIUS**

APPLICATION FOR MBBS ADMISSION

## ALL SECTIONS OF THIS FORM MUST BE COMPLETED & SEND WITH: □ Passport Copy of Student Affix your recent □ Copy of mark sheets 12th / A level, 11th & 10th std / O level passport size photo □ Copy of 12th / HSC / A level pass certificate from the last studied institution ☐ Copy of Transfer certificate issued by last studied institution (if applicable)

□ Copy of conduct certificate issued by last studied institution

☐ Copy of Medical fitness certificate and lab report for HIV, Hepatitis B & Blood group

and sign across

□ Passport copy & 3 month bank statement of parent / Sponsor (minimum balance equivalent to 3500 US\$)																						
Complete all	section	s. Use	black b	<mark>all poi</mark> First N		n only. F	ill th	ne form in le	gibl	e v	/ritir	ıg.										
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Area / District State				!			Country					F	Pin / Post / Zip Code									
Father Factor							Mother							Guardian								
Name																						
Occupation																						
Email Id																						
Contact No. with area code																						
Mobile No. with country cod	le																					
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Name of the qualifying examination								Name of the	sity &	Coun	itry											
Percentage / Grade			Chemis	try Biol		gy	Ma	aths	Bota	any	Zoolog			'	Other (Please specify				fy)			

I declare that all information given in this application & accompanying attachments & enclosures are true to the best of my knowledge. I agree to the condition that, if any information or statement is found to be incorrect, my admission will automatically be cancelled

Signature of Parent / Guardian Date:

Signature of the Candidate Date: