



ALL INDIA PARAMEDICAL & VOCATIONAL EDUCATION COUNCIL
अखिल भारत पैरामेडिकल एवं व्यावसाययरोक परिषद

ADMIT CARD

ENROLLMENT NUMBER	ROLL NUMBER	CENTRE CODE

PERSONAL INFORMATION

CANDIDATE NAME		
FATHER'S NAME		
MOTHER'S NAME		
DATE OF BIRTH		
COURSE		

EXAMINATION DETAILS

PAPER CODE	SUBJECTS
101	Hindi
102	English
103	Sanskrit
105	Bengali
106	Gujarati
107	Kannada

DECLARATION BY THE CANDIDATE

I hereby solemnly affirm that:

- I am duly qualified to take examination in the course for which I have applied and all the certificates and testimonials attached with my application are true and valid. I have also cleared all my dues of Board;
- I shall always follow the rules and regulations of the Board and in case of any breach thereto, I shall be liable to be penalized for the same which may include expulsion from the Board.

Full signature of the candidate
(NOT in BLOCK LETTERS)



Director Examination & Valuation