

**GOVERNMENT OF ASSAM  
DIRECTORATE OF MEDICAL EDUCATION ASSAM  
SIXMILE, KHANAPARA, GUWAHATI-22**

**Declaration / Scrutiny Form for Counseling of B.Sc. Nursing courses, Session 2023**

Name of the candidate: .....

Name of Father/ Mother/Guardian: .....

Address: .....

.....

Roll No. of Ent. Exm. .... Total marks of Ent. Exm .....

Rank of Ent. Exm. .... Phone No .....

Date of Birth: ..... Marks in HSSLC / Equivalent: .....

Subject (10+2)	Marks obtained in (10+2)	Total Mark	Percentage in PCBE	Percentage in PCB
Biology				
Chemistry				
Physics				
English				

College of Preference:

1 <sup>st</sup>	2 <sup>nd</sup>	3 <sup>rd</sup>	4 <sup>th</sup>	5 <sup>th</sup>

Year of Passing HSSLC / Equivalent (10+2): .....

Board / Council: .....

Caste / Categories claiming:

Gen  SC  ST(P)  ST(H)

OBC/MOBC  TGL/Ex-TGL  DIVYANG  EWS

Residential / Nativity Certificate: District: ..... State: .....

Whether Father / Mother is a Assam State Govt. Employee: Yes  No

Signature .....

Full Name: .....

Date: .....