



Chhatrapati Shahu Maharaj Shikshan Sanstha's
DENTAL COLLEGE & HOSPITAL

(An ISO 9001: 2008 Certified)

KANCHANWADI, PAITHAN ROAD, AURANGABAD - 431 011. (M.S.)

(Recognized by Dental Council of India Under Maharashtra University of Health Science, Nashik)

APPLICATION FORM FOR ADMISSION -MDS

- Note -**
1. This form applicable for 2nd and 3rd year admission
 2. Student must be ascertain beforehand that they are eligible for admission to the course for which they are applying.
 3. Admission will be cancelled if the candidate is found ineligible under the provision of ordinance and rules/regulation governing the course.
 4. Fill the form online and submit with attached attested photocopy of mark sheet and no dues form

PHOTO

ADMISSION FOR ACADEMIC YEAR OF MDS

ADMISSION YEAR

GRN NO./ STUDENT CODE

SUBJECT

NAME OF CANDIDATE

CORRESPONDENCE ADDRESS

PERMANANT ADDRESS

CANDIDATES PH. NO.

PARENTS PH. NO.

CANDIDATES EMAIL

CAST

CATEGORY

LAST EXAMINATION DETAILS

PARENTS EMAIL

CLASS YEAR

YEAR OF EXAM

SESSION

DECLARATION BY STUDENT & PARENT/GUARDIAN

1. I hereby declare that the above information is true and complete to best of my knowledge. I am aware that if any information here is found to be incorrect or incomplete, my application will be rejected or admission will be cancelled.
2. I shall abide by its rules and regulations.
3. I have read & understand all the provision contained in the prospects & here by agree to abide by these provision.
4. I will fulfill my attendance and follow rules of antiraging. If found guilty then applicable for punishment.
5. I am aware of the financial obligation of admitting my child to CSMSS Dental College & Hospital. I agree to pay the tuition & other fee payable to the institute as fixed form time to time as per rule of institute. I also affirm & endorse the declaration made above by my child.

Date/Time

Students Signature

Parents / Guardian
Signature

FOR OFFICE USE ONLY

TOTAL FEES RATE RS.

FEES RECEIPT NO.

DATE OF ADMISSION

FEES PAID AMOUNT RS.

OUTSTANDING AMOUNT RS.

ACCOUNT SECTION

ACADEMIC CLERK

O.S.

ACADEMIC INCHARE

DEAN

ADMINISTRATIVE OFFICER