



Mahatma Gandhi Vidyamandir's

R. R. DENTAL COLLEGE & HOSPITAL

Opp. Umra Railway Station, Village Umarda,

Udaipur, - 313015. (Rajasthan)

Mob. : 8003838999, 9772443999 E-Mail: rjrjdc@gmail.com

APPLICATION FORM 2020-21

[TO BE FILLED BY THE APPLICANT (IN CAPITAL LETTER)]

1. **NEET 2020 (ROLL NUMBER)**

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Paste Passport
Size Photograph

2. **NEET 2020 MARKS** (OUT OF 720)

3. **NEET 2020 PERCENTILE**

4. **Name of the Candidate:** _____

5. **Father's Name:** _____

6. **Mother's Name:** _____

7. **DOB:** ____/____/____
(Day) (Month) (Year)

8. **Gender:** Male / Female

9. **Religion:** _____

10. **Category:** Gen. SC ST OBC SBC EWS PH Other

11. **Are you Domicile of Rajasthan:** Yes / No

12. **Permanent Address:** _____

_____ District _____

State _____ Pin. _____

13. Correspondence Address: _____

_____ District _____

State _____ Pin. _____

14 (A) Mobile No. of Candidate:-

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14 (B) What's App. No. of Candidate:-

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14 (C) Mobile No. of Father:-

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14 (D) What's App. No. Father:-

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14 (E) Mobile No. of Mother:-

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14 (F) E-Mail ID (Candidate):-@.....

14 (G) E-Mail ID (Parents):-@.....

Declaration by the candidate and parents:

I do declare that the information furnished by me herein above are true and correct to the best of my knowledge. In case of any information furnished herein above found to be incorrect or any document found to be fraudulent, I do agree to forego my claim/ eligibility for admission and I will abide by the decision.

Place: _____

Date: _____

Signature of the Parent

Signature of the Candidate