UNIVERSITY OF DELHI FACULTY OF MEDICAL SCIENCES

LAST DATE: 05.07.2012

APPLICATION FORM FOR RE-CHECKING OF RESULT OF SUPER-SPECIALITY (D.M./M.CH.) ENTRANCE TEST HELD ON 16TH JUNE, 2012 & 17TH JUNE, 2012

TIMINGS: 09:30 A.M. TO 03:00 P.M. only

Roll No:	Rank:	Marks Obtained:
		Signature of Candidate
Date:/_/2012		Name:
		Address:
		Tel. No.:
F		TY OF DELHI EDICAL SCIENCES
Received with thanks	a sum of ` 750/ (Rupees Seven Hundred Fifty only) towards

Received with thanks a sum of ` 750/ (Rupees Seven Hundred Fifty only) towards Re-checking fees of Super-speciality (D.M./M.Ch.) Course-2012 from Ms./Mr._____ Subject_____ Roll No. _____Rank _____

Dealing Assistant