

**UNIVERSITY OF DELHI**  
**FACULTY OF MEDICAL SCIENCES**

**LAST DATE: 24.06.2011**

**APPLICATION FORM FOR RE-CHECKING OF RESULT OF  
SUPER-SPECIALITY (D.M./M.CH.) ENTRANCE TEST  
HELD ON 4<sup>TH</sup> JUNE, 2011 & 5<sup>TH</sup> JUNE, 2011**

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

Name of Candidate: \_\_\_\_\_

Subject: \_\_\_\_\_

Roll No: \_\_\_\_\_ Rank: \_\_\_\_\_ Marks Obtained: \_\_\_\_\_

*Signature of Candidate*

Date: \_\_\_/\_\_\_/2011

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Tel. No.: \_\_\_\_\_

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**UNIVERSITY OF DELHI**  
**FACULTY OF MEDICAL SCIENCES**

Received with thanks a sum of Rs. 300/ (Rupees three hundred only) towards  
Re-checking fees of Super-speciality (D.M./M.Ch.) Course-2011 from  
Ms./Mr. \_\_\_\_\_ Subject \_\_\_\_\_

Roll No. \_\_\_\_\_ Rank \_\_\_\_\_

**Dealing Assistant**