

GENERAL INFORMATION

1. Application Form in prescribed format should be submitted along with attested Xerox copies of the following certificates:
 - a) **Age Proof Certificate (Class X certificate)**
 - b) **Pass Certificate of Class X and Class XII**
 - c) **Marks Sheet of Class-X and XII**
 - d) **SC/ST/OBC/EWS Certificate**
 - e) **Domicile / Permanent Residence Certificate**
 - f) **Aadhaar Card**
 - g) **Recent passport photograph**
 - h) **Proof of payment of Counselling fee – Rs. 500/-**
Bank Details:
Name of Bank Branch: Bank of Baroda, RIMS Branch, Lamphelpat, Imphal
Name of Account: Director, RIMS, Imphal
Account Number: 59150100002532
IFSC Code: BARB0RIMIMP (0=Zero)
Counselling fee: Rs. 500/- (Rupees five hundred only)
 2. All the original certificates and documents should be produced at the time of Scrutiny.
 3. Candidates who are found eligible for admission as per the reports of the Boards will be allowed to pay the amount of admission fee through a “Fee Book” to be purchased from the Academic Section, RIMS, Imphal. The payment of fees is to be made at the counter of the United Bank of India, RIMS Branch, Lamphelpat, Imphal.
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**REGIONAL INSTITUTE OF MEDICAL SCIENCES
IMPHAL – MANIPUR**

(An Autonomous Institute under the Ministry of Health & Family Welfare, Govt. of India)

2 Nos. of
recent passport
size
photographs.

**APPLICATION FORM FOR ADMISSION INTO
B.Sc. IN MEDICAL LABORATORY TECHNOLOGY (MLT) COURSE AND
B.Sc. IN MEDICAL RADIOLOGY & IMAGING TECHNOLOGY COURSE (MRIT)
FOR THE ACADEMIC SESSION – 2024**

Tick (✓) the relevant box

MLT **MRIT** **BOTH**

1. Name of Candidate:
(in block letter)

2. Name of State:

3. Gender:

4. Date of birth:

Category:

5. a) Address for correspondence (in block letter):

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P.O:.....District:.....

State:..... Pin Code:

Mobile No.:

b) Permanent Address:

P.O:..... District:.....

State:..... Pin Code:

Mobile No.:

6. Father's /Guardian's Name:

7. Mother's Name:

8. Occupation (1) Father

(2) Mother.....

9. Academic Record:

- a) Name of 10+2 Or Equivalent Exam. passed:
- b) Year of passing:
- c) Name of School/College:
- d) Name of Board/Council/University:

10. Mark secured in the 10+2 Examination:

<i>Sl.No.</i>	<i>Subject</i>	<i>Full Marks</i>	<i>Marks obtained</i>	<i>Total Marks obtained</i>
1	Physics			
2	Chemistry			
3	Biology			

I hereby declare that the information given in the application is correct. In case, at any stage, the information furnished by me is found to be false, my admission may be cancelled. I, further, declare that I shall abide by the rules and regulations of the Institute and also obey orders given by the authority for conduct, discipline and studies from time to time.

Date:

Signature of the Candidate