RECEIPT NO. WITH DATE:	
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(For OFFICE use only)

NORTH EASTERN INSTITUTE OF AYURVEDA & FOLK MEDICINE RESEARCH (NEIAFMR)



(An Autonomous Institute under the Ministry of Ayush)
GOVERNMENT OF INDIA
PASIGHAT, ARUNACHAL PRADESH-791102

Affiliated to the Rajiv Gandhi University (A Central University), Itanagar,
Arunachal Pradesh - 791111

AFFIX SELF ATTESTED RECENT PASSPORT SIZE PHOTOGRAPH

APPLICATION FORM

For Admission into BAMS (Bachelor of Ayurvedic Medicine & Surgery) course for Academic Year 2025-26

1. Name in full (In BOLD)
2. Mother's Name
3. Father's /Husband's Name:
4. Address: (in CAPITAL letters)
(i) Present address (for correspondence, with phone/mobile No. & E-mail) -
Pin Code:
Email Id:
Mobile no
(ii) Permanent Home address –
PIN Code:
5. a. Date of Birth (in the figure): dd mm yyyy
b. Date of Birth (in words):
c. Age (as of 31st December 2024)
6. a) Nationality: 6. b) Name of the State:
7. a) Gender: Male Female 7. b) Religion
8. Category (Gen /SC/ST/OBC/PWD/EWS)
{In support, please enclose caste certificate from authorized Issuing authority;
(For OBC, NON-Creamy Layer Certificate from competent authority is mandatory))

Qualification (Academic & Professional)-	9.	Oualification	(Academic & Pro	fessional)-
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(Please enclose a self-attested Photocopy of each certificate & mark- sheet)

Examination	Name of the College & University and Board	Year of passing	Division obtained (mention distinction if any)	Percentage of marks/CGPA obtained (Aggregate in Case of degree program)	Subject(s)
10 th or Equivalent					
(10+2) or Equivalent					
Any other examination(s)					

10. Statement of Marks obtained in NEET 2025.

Examination	NEET-2025 Roll No.	NEET-2025 All India Rank	NEET-2025 Category Rank (if applicable)	NEET-2025 Mark
NEET 2025 conducted				
by NTA				

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Amount:	Demand Draft No:
Date:	Bank/ branch:
LIPI Transaction	ı ID:

12. Enclosure checklist - Original

SNO	DOCUMENT	Y/N
1	NEET Admit Card	
2	NEET Mark sheet	
3	10th Mark sheet, Certificate, Admit Card	
4	12th Mark sheet, Certificate, Admit Card	
5	PRC (Permanent Resident Certificate)/Domicile Certificate	
6	Caste Certificate (If Applicable)	
7	Demand Draft (Original)	
8	Any Other Relevant Documents	

DECLARATION

I affirm that information given in this application is true and correct, to the best of my knowledge. I also fully understand that if at any stage it is discovered that any attempt has been made by me to willfully conceal or misrepresent any facts, my candidature may be summarily rejected or expelled.

Place:	Signature of Candidate
Date:	
	(NAME IN CAPITAL)