DST GROUP OF INSTITUTIONS

@BHUBANESWAR: Sundarpada, Bhubaneswar, Khordha, Odisha-751002
@BERHAMPUR: NH-16, Berhampur Bypass, Ganjam, Odisha -760007

FORM NO	
LAST DATE OF SUBMISSION	

ADMISSION CUM REGISTRATION FROM

TO
THE CHAIRMAN
DST GROUP OF INSTITUTIONS

Sir,

UNITY INSTITUTE OF PARAMEDICAL SCIENCE AND RESERACH (U-IPSAR) ☐
LINGARAJA ELECTEO HOMOEOPATHIC MEDICAL COLLEGE AND HOSPITAL (LEHMCH) ☐
LINGARAJA INSTITUTE OF MEDICAL AND SCIENCE (LIMS) ☐

Affix four stamp size color photographs

I request you to admit myself/my son/daughter/ward in your institute in my own interest.

1. **Name of the Student** .....
2. **Name of the Father** .....
3. **Occupation / Profession**..... (Father)
4. **Sex** Male ☐ Female ☐
5. **Date of Birth -** DAYS ☐☐ MONTH ☐☐ YEAR ☐☐☐☐
6. **Category -** GEN ☐ SC ☐ ST ☐ OBC ☐ DEF ☐ OTH ☐
7. **Course to which intend to take Admission** .....
8. **Educational Qualification**

Class	Board / University	Year of Passing	% of Marks
10th			
+2			
+3			
Other			

9. **Present Address:**

C/o	
Plot No:	At:
PO:	Dist.:
Pin:	Ph:
Mob:	E-mail :.....

10. **Permanent Postal Address**

C/o	
Plot No:	At:
PO:	Dist.:
Pin:	Ph:
Mob:	E-mail :.....

10. Name and Address of the local Guardian.....

11. ***I came to know about DST GROUP OF INSTITUTIONS***

Newspaper (Specify) Friends / Relatives
Electronics Media / TV Old Student (Give details)
Other source

12. Enclosures:-

RULES AND REGULATIONS

1. Admission to all courses will be through aptitude test & personal interviews.
2. The Director of the institute reserves the right to refuse admission to any candidate without assigning any reason thereof.
3. No student shall remain absent himself/ herself from the institute without leave application duly signed/ request over ph. one or e-mail by the pa rents. Disciplinary action will be initiated against the defaulters.
4. No student will be allowed to the institution premise without dress code and I-card.
5. Chewing of tobacco & smoking is not allowed in the premises. In case any student is found to have indulged in such activities, strict disciplinary action will be initiated,
6. Any student intending to discontinue at any time dur ing the academic session shall have to apply in advance and obtain the permission of the Director however no refund of fees will be entertained.
7. Fees must be paid in full towards course fee or through instalment as would be fixed and shall be paid within the stipulated period. The installment so fixed shall be paid by the student by 10th of the month, after which a fine of Rs.10/- per day will be charged for maximum period of 30 days and there after admission of such defaulters shall be treated as cancelled. In case such a student approach-es in writing for continuance for his / her studies he / she will be allowed on payment of Rs. 200/- as admission fees with remaining dues on approval of the manage ment.
8. All disputes are subject to judicial jurisdiction of Bhubaneswar Court only
9. 75% of the minimum attendance is required to qualify to sit in the exam.
10. I shall pay all fees of the programme for the tutorial and the practical as decided by DST GROUP OF INSTITUTIONS and also pay for all such chargeable services provide by DST GROUP OF INSTITUTIONS. And I agree to the condition that I shall not claim any refund of fees or compensation on any circumstances.

Signature of the Father/Guardian

Signature of the Applicant

DECLATION

I declare that the particulars furnished in the form are complete in all respects and true to the best of my knowledge and belief. I hereby undertake to abide by the rules/regulations of DST GROUP OF INSTITUTIONS during the period of my studies. I understand that the Director of the Institute has the full authority to cancel my student-ship at any time without assigning any reason thereof.

Signature of the Applicant

Signature of the Father/Guardian

FOR OFFICE USE ONLY

(I) Admission in Course..... (ii) Lumpsum/Installment.....

(iii) Student Regn. No..... (iv) Course Fee.: .....

(iv) Hostel Fee..... (vi) Other Fee.....

(vii) Date..... (viii) MR. No.....

(lx) Remarks if any.....

Signature of in charge (Computer Section)

Signature of Admn. in charge

Signature of Director