

MGM INSTITUTE OF HEALTH SCIENCES

(Deemed to be University u/s of 3 UGC Act, 1956) Accredited by NAAC with 'A' Grade

APPLICATION FORM FOR VERIFICATION OF MARKS (MGM-CET-2020)

LAST I	DATE OF SUBMISSION	N FORM : 02.11.2020	
NAME	OF THE CANDIDATE	:	
ADDRESS		:	
CONTACT NO.		:	
SEAT /ROLL NO		: <u> </u>	
APPERING COURSE		:	
APPLICATION NO		:	
CET C	ENTRE NAME	:	
Sr.No		Name of the course	Marks Obtained
1			
3.Send Health	the filled in Application Sciences, Sector 1, Kamt	by RTGS 'MGM Institute of Healt Form along with the RTGS Receipt ohe, Navi Mumbai' on or before 02 ion of marks: Total Amount:	to 'The Registrar, MGM Institute of 1.11.2020
Date:			Signature of Candidate
~ ~		ACKNOWLEDGEMENT	
Receive	ed application form for v	erification of marks of MGM-CET-	2020 of Rs from
Ms/Mr		.MGM-CET-2020	
Seat No)		
Date:		Stamp &	& Signature of Receiving Authority