

Cost of Application form : Rs.2000/-.
Fee for submission of application form
US \$ 1000 (or equivalent in Indian currency) .



BABA FARID UNIVERSITY OF HEALTH SCIENCE

SADIQ ROAD, FARIDKOT – 151203 (PB) INDIA

APPLICATION FORM FOR Admission to MBBS/BDS Course

(For Admission under NRI Quota)

SESSION – 2026

Candidates seeking admission under the NRI Quota shall be required to submit the prescribed NRI application/eligibility fee of US \$1,000 (or its equivalent in Indian Rupees) during the period w.e.f 07.09.2026 to 08.09.2026. **Application Fee:** US \$1,000 (or equivalent in Indian Rupees) as prescribed in the Prospectus.

- Note:** The application fee once deposited in the University account shall be **non-refundable and non-adjustable** under any circumstances.

PART–A: PERSONAL DETAILS

Particulars	Details
1. Name of the Applicant (in CAPITAL letters)	
2. Father's Name (in CAPITAL letters)	
3. Mother's Name (in CAPITAL letters)	
4. Date of Birth (DD/MM/YYYY)	___ / ___ / ____
5. Gender	☐ Male ☐ Female ☐ Other
6. Nationality	
7. Country of Residence	
8. Passport Number	
9. Course Applied For	MBBS / BDS
10. Academic Session	2026

PART–B: FAMILY DETAILS

Particular	Details
Father's Name	
Mother's Name	

PART–C: ADDRESS DETAILS

Permanent Address (India)

Name of Country: _____

Address: _____

Mobile No: _____ Telephone No. _____ E-Mail: _____

Overseas Address

Name of Country: _____

Address: _____

Mobile No: _____ Telephone No. _____ E-Mail: _____

PART–D: ACADEMIC DETAILS

1. NEET (UG)-2026

Roll Number	Registration No.	Marks of NEET	Percentile	All India Rank

2.

Class XI (10+1) Examination			
Year of Passing	Roll Number	School/Institution	Board/University

3.

Qualifying Examination (10+2 or Equivalent)						
Year of Passing	Roll Number	School/Institution			Board/University	
Marks Obtained						
Subject Marks	Physics	Chemistry	Biology/ Biotechnology	English	Total (PCBE)	Total (PCB)
Marks Obtained						
Maximum Marks						

4. Recognition Status

(a) Whether the School/Institution is recognized?

☐ Yes

☐ No

(Attach documentary proof)

(b) Whether the Board/University is recognized?

☐ Yes

☐ No

(Attach documentary proof)

Recognition Status

Is the School/Institution recognized/accredited?

☐ Yes ☐ No

Is the Board/University recognized?

☐ Yes ☐ No

PART-E: NRI CATEGORY

Seats under the NRI Quota shall be filled in the following order of priority:

☐ Category-I	NRIs/Children of NRIs who originally belong to the State of Punjab
☐ Category-II	NRIs/Children of NRIs who originally belong to any State of India other than Punjab.

PART-F: NRI DETAILS

Particular	Details
Country of Residence	
Passport No.	
OCI/PIO/PR Card No. (if applicable)	
NRE Account No.	
Name of Bank	

PART-G: PAYMENT DETAILS

Particular	Details
Amount Deposited	
Mode of Payment	☐ Online ☐ Demand Draft
DD/Transaction No.	
Date	
Bank Name	

DECLARATION

I hereby declare that all the information furnished in this application form and the documents submitted by me are true, complete and correct to the best of my knowledge and belief.

I understand that if any information or document is found to be false, fabricated, suppressed or incorrect at any stage, my candidature and/or admission shall be liable to be cancelled forthwith, and I shall have no claim whatsoever against the University.

I further declare that I have read and understood all the provisions of the MBBS/BDS Admission Prospectus-2026 and agree to abide by the rules, regulations, instructions and decisions of Baba Farid University of Health Sciences, Faridkot, the Government of Punjab, the National Medical Commission and other competent authorities.

Place

Date:

Signature of Parents

Signature of Candidate