



Roll Number:	2603007311	Application Number:	210410522644
Candidate's Name :	NANDINI KUMARI	Father's Name	UDAY SHANKAR OJHA
Gender :	Female	Date of Birth :	30-06-2001
Category :	GENERAL	Person With Disability (PwD):	NO
Scribe :	NA		



Nandini Kumari  
Candidate's Signature

Test Details

Question Paper Medium	English
Date of Examination	12.09.2021 (Sunday)
Reporting / Entry Time at Centre	12.20PM (IST)
Gate Closing Time of Centre	01.30PM (IST)
Timing of Test	02.00PM to 05.00PM (IST)
Test Centre No	2603007
Test Centre Name	GURU NANAK HR SEC SCHOOL P P CMPD RANCHI JH
Test Centre Address (Venue of Test)	GURU NANAK PURA,P P COMPOUND, PEE PEE COMPOUND, NEAR JHARKHAND, 834001

*Sanjay Kumar*  
SENIOR DIRECTOR(NTA)

SELF DECLARATION (UNDERTAKING)

I, **NANDINI KUMARI**, resident of **OJHA SADAN BASUDEV OJHA MARG PISKA MORE RANCHI JHARKHAND OJHA JHARKHAND 834005**, do hereby, declare the following:

- That, I have read the Instructions, Guidelines and relevant orders of the Govt. of India pertaining to COVID-19 protocol, Bulletin, Instructions and Notices related to this examination available on the website <https://neet.nta.nic.in> and v
- I have in the last 14 days (please tick, wherever it is applicable to you, otherwise leave blank):

a) the following flu-like symptoms:

- |   |  |
|---|--|
| • Fever: <input type="checkbox"/>         | • Sore throat/runny Nose <input type="checkbox"/>      |
| • Cough: <input type="checkbox"/>         | • Body ache: <input type="checkbox"/>                  |
| • Breathlessness <input type="checkbox"/> | • Other Please Specify: _____ <input type="checkbox"/> |

b) been in close contact with a confirmed case of the COVID-19. ('Close contact' means being at less than one