



**Dr. Moopen's
Medical College**

Dr. MOOPENS MEDICAL COLLEGE, WAYANAD

Student Information	
Admission Number	0090
Roll Number	2332
Admission Date	2024-08-17
Course	test
Name (As in 10th Certificate)	test1
Name of Candidate With Initials Expanded	t
Gender	male
Adhaar Number	12345678
Blood Group	B+
Religion	Sikh
Caste	sdfghjk
Category	GENERAL
Nationality	BELIZE
Place Of Birth	asdfghj
Date Of Birth	2006-06-26
Age	18
Present Address	asdfghj
Present Pincode	23456
Email	soniyacn62@gmail.com
Mobile	123456789
Mobile No	12345678
Mother Tongue	sdfghjkl
Nativity	sdfgh
Permanent Address	asdfghj
City/Street	qwer
Post	ghj
Pin Code	123456
District	vbnm
State	sdfgh
Country	dfgh
Father's Name	werty
Profession	sdfghj
Designation	vbn
Mobile (WhatsApp)	1234567
Mobile (Office)	12345678
Email ID	s@gmail.com
Mother's Name	dfghjkl
Profession	dfghjkl
Mobile	12345678
Email ID	w@gmail.com
Local Guardian's Name	asdfgh
Guardian Relation	ghjk
Guardian Occupation	dfghjk
Mobile	vbnm
Email ID	aaa@gmail.com
Passing Month & Year	2009
Register No	123456
Total Aggregate Mark for the Course	78
Bank Account Name	xsze
Account Number	123456
Bank Name	yyutdf
IFSC Code	xcv23456
Relationship	fgh