



All India Institute of Medical Sciences


Ansari Nagar, New Delhi - 110029

Entrance Examination - 2025

Registration Form - AIIMS B.Sc. Courses - 2025

13/05/2025 21:39:53

Candidate Profile **Registration ID:** U5342979959 **Payment ID:** 1177861 **Registration Unique Code:** 5963220

| | | |
|--|-----------------------------------|--|
| Candidate Name: ANKITA SRIVASTAV | Date of Birth: 03 Sep 2005 |  <p>ANKITA SRIVASTAV 19-02-2025</p> |
| Gender: Female | Category: EWS | |
| Father's Name: ANOOP KUMAR SRIVASTAV | Mother's Name: SANGAM SRIVASTAV | |
| PWBD Status: No | PWBD Category: NA | |
| Nationality: INDIAN | State of Domicile : UTTAR PRADESH | |
| Applied Course : B.Sc. (Hons.) Nursing | | |

Contact Details

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|--|---|
| Address for Permanent: AWAS VIKAS COLONY KATRA BASTI , , Basti , UTTAR PRADESH, India, 272001 | Correspondence Address: AWAS VIKAS COLONY KATRA BASTI , , Basti , UTTAR PRADESH, India, 272001 |
| Mobile No: 1. 9792941962 , 2. No | E-Mail ID: anoopsrivastav235@gmail.com |

Qualification Details

| Qualifying Exam | Qualifying Exam Status | Roll No. : | Exam Board Name | State Name | Subject Choice | Passing/Expected Year |
|---------------------|------------------------|------------|-----------------|---------------|--|-----------------------|
| 12th/SSC Exam(10+2) | Passed | 23619521 | CBSE | Uttar Pradesh | Physics, Chemistry, English and (Biology Only) | 30/04/2022 |

Academic Details

| Qualifying Exam Status | Scoring Scheme | Max Marks | Marks Obtained | Percentage(%) |
|------------------------|----------------|-----------|----------------|---------------|
| Passed | Percentage | 500.00 | 350.00 | 70.00 |

Valid Photo Identity (To be presented in original at the Examination Center along with Admit Card)

| | | | | |
|-----------------------|---------------------|-----------------------|----------------|----------------|
| ID Proof: Aadhar Card | ID No: 985005027710 | Place of Issue: India | Issue Date: NA | Valid Till: NA |
|-----------------------|---------------------|-----------------------|----------------|----------------|

Payment Details

| | | | |
|--------------|------------------|-----------------------------|--------------|
| Mode: Online | Date: 13/05/2025 | Transaction ID: 59632201228 | Amount: 1600 |
|--------------|------------------|-----------------------------|--------------|

Examination City :

State: UTTAR PRADESH

Choice : GORAKHPUR

State 2: UTTAR PRADESH

Choice 2: LUCKNOW

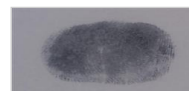
State 3: UTTAR PRADESH

Choice 3: VARANASI

UNDERTAKING/DECLARATION: I hereby declare that the information furnished by me in the Registration/Application Form is correct and nothing has been concealed. In case any information furnished by me is found to be false/incorrect/untrue than i shall be liable to civil/criminal prosecution and my claim to admission/appointment/registration/ service in the Institute may be cancelled/terminated.

Ankita Srivastav

Signature of Candidate



Thumb of Candidate