

NEET - PG 2022

Personal Details

Application Seq No

PG031695

Father's Name

GANESH S

Nationality

INDIAN

Gender

FEMALE

Religion

HINDU

Place of Birth

TIRUPPUR

Are You Willing to Take up Post Graduate Courses in Armed Forces Medical Services Institutions

NO

Candidate's Name

HEMALATHA G

Mother's Name

VEDHANAYAKI

Are you a Non Resident Indian (NRI)?

No

Date of Birth

10/Oct/1993

Category

OBC

Are you a person with disability?

NO

Mobile Number Alternate Mobile Number 8921652963 8281495281 Email ID HEMALATHA.G1010@GMAIL.COM **Identification Details** Do you have Government of India issued PAN CARD? Government of India Issued PAN CARD Number YES APRPH7254M Do you have Government of India issued DRIVING LICENSE? Government of Inida Issued DRIVING LICENSE Number YES 70/5312/2015 Do you have Government of India issued PASSPORT? Driving License Validity 19/11/2035 YES Government of India Issued PASSPORT Number **PASSPORT Validity** V4212498 21/11/2031 Do you have Government of India issued VOTER ID CARD? Government of India Issued VOTER ID CARD Number YES XEE0539486 MARK OF IDENTIFICATION 2 (Birth mark/Body mark) MARK OF IDENTIFICATION 1 (Birth mark/Body mark) A MOLE OVER RIGHT ARM TATOO OVER LEFT ARM

Correspondence Address

Address Line 1

LAKSHMI BHAVAN, BALA BHAVAN ROAD,

Address Line 2

M O WARD

INDIA KERALA City/District Pin Code **ALAPPUZHA** 688011 Is Permanent Address same as Correspondence address? YES Permanent Address Address Line 1 Address Line 2 LAKSHMI BHAVAN, BALA BHAVAN ROAD, M O WARD Country State **INDIA KERALA** Pin Code City/District 688011 **ALAPPUZHA Academic Details** State/UT of Completion of Class 12th State/UT of Completion of Class 10th **KERALA KERALA MBBS** Details Country of completion of MBBS Qualification State/UT INDIA **KERALA** University of Completion City **PALAKKAD** KERALA UNIVERSITY OF HEALTH SCIENCES, THRISSUR

State

Country

Name of College Other College **OTHERS** KARUNA MEDICAL COLLAGE Date of Passing 06/2017 **Internship Details** Have you completed Internship City of Internship YES **PALAKKAD** Institute of Internship Date of start of Internship KARUNA MEDICAL COLLAGE 10/07/2017 Date of completion of Internship 14/07/2018 Medical Council Registration Details NMC/SMC Registration Type NMC/SMC Registration Number **PERMANENT** 66790 State/UT of Registration Registration Medical Council **KERALA OTHERS** Other Medical Council TRAVANCORE COCHIN COUNCIL OF MODERN MEDICINE

MBBS EXAMINATION MARKS

66.4

1st MBBS Examination-Percentage of marks obtained

13t WDD3 Examination i ercentage of marks obtained

2nd MBBS Examination-Percentage of marks obtained

64.7

Additional Information Deported/Rusticated during Medical Course Charged of use of unfair means by NBEMS/Other examination body NO NO Previous Roll No. Have you appeared in NEET PG previously YES 2166068893 Year of appearing 09/2021 **Test Center Details** State City **KERALA ALAPPUZHA Payment Details** Amount Payment Mode 4250 online Payment Transaction No Payment Status 7336171672112 S

61.67

Aggregate marks in percentage in all MBBS professional examinations

Candidate Images Upload Details

Final MBBS Examination (Including Part 1 and 2) -Percentage of marks obtained

62.2



Captured Photo



Uploaded Photo



Signature



Left Thumb Impression

Attachments

To view NMC/SMC registration certificate of MBBS QualificationClick here.

Declaration

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No content of this exam must be shared with friends, acquaintances or third parties including sharing through online means or via social media. Social media includes but not limited to SMS, Whatsapp, Facebook, Twitter, Hangouts, Blogs etc using either one's own account or proxy account(s).

By registering for and /or appearing in NEET PG the candidate explicitly agrees to the above Non Disclosure Agreement and general terms of use for NEET PG as contained in this Information Bulletin, and NEET PG website.

I certify that I have physically attended the course of my primary medical qualification for the mandated period as per requirement of the University concerned toward award of my primary medical qualification degree certificate.

Violation of any act or breach of the same shall be liable for penal action and cancellation of the candidature at the bare threshold.

I certify that I fulfill the eligibility requirements for NEET PG and have furnished complete and correct information. I understand that any instances of furnishing incorrect information detected during any stage of the examination process will automatically disqualify me from the examination process and I will not be allowed appear for NEET PG in future.

Similarly, if such instances go undetected during the current examination process but, are detected in subsequent years, such disqualification will take place with retrospective effect.

I also understand that providing incomplete information will automatically disqualify me from the examination process. I have read the information bulletin and do hereby undertake that I will not indulge in any unfair means/practice for NEET-PG I understand that the decision of NBE shall be final and binding upon me.

Any dispute concerning NEET PG would be subject to Jurisdiction of the Competent Courts exclusively at Delhi/New Delhi only. I will comply with the Non Disclosure Agreement as indicated in the information bulletin. I certify that I have read the information bulletin thoroughly."

Version 14.03.01