



All India Institute of Medical Sciences


Ansari Nagar, New Delhi - 110608

AIIMS Undergraduate Basic Registration Form

Candidate Profile

Registration ID: U5321995918

Basic Registration Date: 11/03/2023

Candidate Name: NIRANJANI TIWARI	Date of Birth: 28 Mar 2003	
Gender: Female	Category: General	
Father's Name: SURESH CHANDRA TIWARI	Mother's Name: VIMLA TIWARI	
PWBD Status: No	PWBD Category: NA	
Nationality: INDIAN	State of Domicile: UTTAR PRADESH	

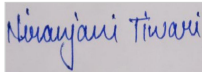
Contact Details

Address for Permanent: MOHALLA - KAHARAN (SASTRI NAGAR), BHINGA SHRAWASTI, Bhinga , Shrawasti, UTTAR PRADESH, India, 271831	Correspondence Address: MOHALLA - KAHARAN (SASTRI NAGAR), BHINGA SHRAWASTI, Bhinga , Shrawasti, UTTAR PRADESH, India, 271831
Mobile No: 1. 9026675603 , 2. Alternate-MobileNo 7522071471	E-Mail ID: niranjanitiwari28@gmail.com

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

ID Proof: Aadhar Card	ID No: 994068904096	Place of Issue: India	Issue Date: NA	Valid Till: NA
-----------------------	---------------------	-----------------------	----------------	----------------

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.



Signature of Candidate



Thumb of Candidate