



All India Institute of Medical Sciences


Ansari Nagar, New Delhi - 110608

AIIMS Undergraduate Basic Registration Form

Candidate Profile

Registration ID: U5181374375

Basic Registration Date: 24/12/2018

Candidate Name: GANJI ANURAG	Date of Birth: 03 May 2001	 <small>GANJI ANURAG 01-11-2018</small>
Gender: Male	Category: OBC (NCL)	
Father's Name: GANJI SATHAIAH	Mother's Name: GANJI JHANSI RANI	
PWBD Status: No	PWBD Category: NA	
Nationality: INDIAN	State of Domicile: TELANGANA	

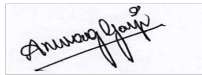
Contact Details

Address for Permanent: H.NO 1-8-43/C1/1, 10TH WARD, CHURCH COMPOUND, SURYAPET, Suryapet , Nalgonda, TELANGANA, India, 508213	Correspondence Address: H.NO 1-8-43/C1/1, 10TH WARD, CHURCH COMPOUND, SURYAPET, Suryapet , Nalgonda, TELANGANA, India, 508213
Mobile No: 1. 9848880336 , 2. Alternate-MobileNo 9848651156	E-Mail ID: jhansirani.jrg@gmail.com

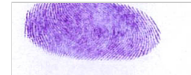
Valid Photo Identity (To be presented in original at the Examination Center along with Admit Card)

ID Proof: Aadhar Card	ID No: 291821866971	Place of Issue: INDIA	Issue Date: NA	Valid Till: NA
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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