



RAJASTHAN UNIVERSITY OF HEALTH SCIENCES

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RUHS Ph.D. ADMISSION TEST-2010

CHECK LIST

Name of candidate:

Telephone no.: Cell no.:

| S. No. | Name of document | Enclosed Y/N | For official use Checked | For official use Correct/ Incorrect |
|--------|--|--------------|--------------------------|-------------------------------------|
| 1 | Application form | | | |
| 2 | Demand draft | | | |
| 3 | Marks sheet of undergraduate examination | | | |
| 4 | Marks sheet of postgraduate examination | | | |
| 5 | Date of Birth Certificate | | | |
| 6 | Caste certificate, if applicable | | | |
| 7 | Physical Disability certificate not later than 6 months old, if applicable | | | |
| 8 | | | | |
| 9 | | | | |
| 10 | | | | |

I undertake that I have enclosed and properly tagged all above mentioned documents, duly attested, with the check list.

I also undertake I would regularly visit www.ruhsraj.org website for updated information.

Signature of Candidate with date

Note: This check list must be enclosed with the application form.