

User Manual

[Important Instructions for Applicants filling AIIMS - Ph.D. Programme July - 2017 Session Online Registration Form]

- Open the website of All India Institute of Medical Sciences. The URL of the website is <http://www.aiimsexams.org>.
- The home page as shown below appears on the screen.

All India Institute Of Medical Sciences, New Delhi
Examination Section (www.aiimsexams.org)
110608

Admin Login | Click Here

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Clarification: The cutoff in AIIMS MBBS Entrance Examination 2015, for respective categories determines the eligibility for admission. Out of all eligible, the Merit List for counselling includes only the top 10 times the number of seats available in each category (see prospectus section 2.0 on counselling for details). Only those in the Merit List are called for counselling. Those who are eligible but are not in Merit List are informed regarding 'open selection', if seats remain vacant after the counselling process is over.

Registration

- After opening the website, the next step is Registration.
- By clicking on **Academic Courses Tab** an Applicant can navigate to the desired course i.e. **Ph.D.** to registered him/her self.



All India Institute Of Medical Sciences, New Delhi
Examination Section | www.aiimsexams.org
New Delhi - 110008

Admin Login | AIIMS Website

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Branch	Undergraduate	Postgraduate	Super-specialization	Doctoral
Medicine	MBBS	MD/MS/MCh(2yrs)/DM(2yrs) MD (Hospital Administration)	DM MCh Fellowship Programme	PhD
Dentistry		MDS AIPGDE		
Nursing	B.Sc. (Hons) B.Sc. (Post Basic)	MSc (Nursing)		
Biotechnology		M Biotech		
Paramedical	B.Sc. (Hons) in Medical Technology in Radiography Bachelor of Optometry	MSc		

Select the course to go to the respective page for details

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For New Registration, click on **Click Here** button on New Registration Page.

For already registered candidate, enter **Candidate Id, Password** (already sent on registered email id) and **Captcha** and then click on **Login** button.



Applicant must ensure that their mobile number is not registered with DND (Do Not Disturb) service. Applicant must check his/her Email Inbox, Junk mail and Spam after registration to get Login Credential for complete registration process.

Step 1: Registration

On clicking the “Proceed” button Next page shown will be the **New Candidate Registration Form.**

(All #marked fields are optional).

Select the desired course.

New Candidate Registration PHD (*) marked fields are optional

Course Applying for:

Personal Details

(Enter Full Name as per your University Degree)
Full Name:

(Do not add salutation for Father's/Mother's name)
Father's Name: Mother's Name:

Nationality: Indian OCI Other
Applied Under: Marital Status: Married Unmarried
Department:

(All OBC Creamy Layer Candidate will be consider as General)
Community: UR OBC(NCL) SC ST
Date of Birth: Gender: Male Female Third Gender
OPH: Yes No
ID Proof: ID No.:
(Please bring along this ID Proof at the time of examination)
Place of Issue: Issue Date: #
Valid Till: #

Contact Details

(Your Email ID and Mobile Number will be used for Communication and Notification through SMS and E-mail)

Email ID: Confirm Email ID:
Mobile No.: Confirm Mobile No.:
Please enter your 10 digit mobile number only. Don't add '0' or '+91' before it. For Landline number please enter the "STD" code of that area.
Alternate Number: # Mobile Landline

Address Details

Correspondence Address	Permanent Address
Address Line 1: <input type="text" value="D-217,DDA FLATS BINDAPUR"/>	<input checked="" type="radio"/> Same as Correspondence Address
Address Line 2: # <input type="text" value="UTTAM NAGAR NEW DELHI"/>	Address Line 1: <input type="text" value="D-217,DDA FLATS BINDAPUR"/>
Address Line 3: # <input type="text"/>	Address Line 2: # <input type="text" value="UTTAM NAGAR NEW DELHI"/>
Country: <input type="text" value="India"/>	Address Line 3: # <input type="text"/>
State: <input type="text" value="Delhi"/>	Country: <input type="text" value="India"/>
City: <input type="text" value="New Delhi"/>	State: <input type="text" value="Delhi"/>
Pincode: <input type="text" value="110059"/>	City: <input type="text" value="New Delhi"/>
<input type="text" value="4 0 8 3"/>	Pincode: <input type="text" value="110059"/>

Note: Fields Name, DOB, Community and OPH cannot be changed after payment. Please give due attention while filling these informations.

Declaration of Eligibility: Kindly read the declaration carefully and give consent on it

I, hereby declare that the information filled in the form is correct and true to best of my knowledge. I further declare that I understand and fulfill the eligibility condition for AIIMS PHD Registration as mention in the prospectus.

Kindly note your Candidate ID: 10665.

A mail has been sent to your registered Email ID with login details which are required at the time of login.

Your 2nd Step of registration is completed. Your registration is still incomplete, complete the steps.

Note: If you have not received confirmation mail in inbox, kindly check your mail in SPAM folder!!

OK

Registration Address:

DDA PLATS:

DAWARKA SEC-3

India

Delhi

New Delhi

Phone No: 110028

Phone No: 110028

Enter Captcha: 10665

1 0 6 6 5

Note: Full Name, Department, Community, Date of Birth and OPH cannot be changed once payment of Registration fee is done. Please do not make a mistake while filling these details and save.

Declaration of Eligibility: Kindly read the declaration carefully and give consent on it.

I, I hereby declare that the information filled in this form is correct and true to best of my knowledge. I further declare that I understand and fulfill the eligibility condition for AIIMS (PG) Programme duly mentioned in this form before.

Read the Declaration of Eligibility carefully and give consent on it before submitting the form.

After filling the required information then click on **“Register”** button. After Click on register button a message will appear on screen containing **‘Candidate ID’ and ‘Password’**. An **Email and SMS** will also be sent to registered **E-mail Id** and **mobile number** having Login Credentials i.e. **Candidate ID** and **password**.

Please note this candidate id for future references.

i)Change Password

Login with the provided login Credentials i.e. **Candidate Id** and **Password** and correct **Captcha**. On first time login, candidate has to change password Change Password through **Change Password** page. **Re-login** with the new changed password to complete due steps of Registration Process.

All India Institute of Medical Sciences

Helpline No.: 8010010247, 9082949110

WELCOME, | PG | CANDIDATE ID: 106655

Mon May 02 2016 16:44:04 GMT+0531 (India Standard Time)

Logout | My Page

1 Registration 2 Candidate Details 3 Paperwork Details 4 City Choice 5 Exam Payment 6 Upload Images 7 Final Registration Form

Change Password

Current Password: *

New Password: *

Confirm Password: *

Submit Exit

Your Password has been change successfully. Please Login with new Password and complete registration process.

Information Page

After re-login the next page appears will page will show the **all Seven (7) steps of Registration Process**. First step is new candidate **Registration for Ph.D. July 2017 Session**.

The color of the Number of the Step in Navigation Bar will change from Red to Yellow as the steps get completed and candidate can jump/go to any steps among the completed steps at any time.

Color will change from Red to Yellow as a step of registration gets completed

WELCOME: TEST CANDIDATE ID: 300033 Helpline No.: 8510010247, 9582949110
Mon May 02 2016 18:48:22 GMT+0530 (India Standard Time)

Logout My Page

1 2 3 4 5 6 7
Registration Qualification Details Experience Details City Choice Make Payment Upload Images Print Registration Form

My Details

Candidate ID:	300033	Course Applied:	Ph.D. Programme
Candidate Name:	TEST		
Father's Name:	TEST	Mother's Name:	TEST
Date of Birth:	31-Oct-1990	Category:	UR
Applied Under:	General	Department:	Cardiology
Gender:	Male	ID Proof:	Adhar Card
Nationality:	Indian	Place of Issue:	NEW DELHI
Marital Status:	Unmarried	ID No.:	1234565
OPH:	No	Issue Date:	
E-Mail:	sr.deepakfatar@gmail.com	Valid Till:	
Mobile No:	9650813622	Alternate Number:	-

Correspondence Address		Permanent Address	
Address Line 1:	D-217	Address Line 1:	D-217
Address Line 2:	DDA FLATS	Address Line 2:	DDA FLATS
Address Line 3:	DWARKA SEC-2	Address Line 3:	DWARKA SEC-2
Country:	India	Country:	India
State:	Delhi	State:	Delhi
City:	New Delhi	City:	New Delhi
Pincode:	110059	Pincode:	110059

Your Due Steps

✘ Qualification Details	Incomplete
✘ Experience Details	Incomplete
✘ City Choice	Incomplete
✘ Make Payment	Incomplete
✘ Upload Images	Incomplete
✘ Registration Form	Incomplete

Edit Proceed

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iii) Edit Information Page

Candidate should re-check the filled in information, in case there is some error in the information filled in the form Candidate can edit some information by clicking on **Registration Yellow Wizard**. It will redirect candidate to **Registration page** where some information can be edited.

WELCOME: TEST CANDIDATE ID:103457

Registration 1, Qualification Details 2, Experience Details 3, Career Choice 4, Make Payment 5, Upload Images 6, Registration Step 7

Registration Form (19/19 marked fields are captured)

Course Applying for: Ph.D. Programme

Personal Details

(Enter Full Name as per your University Degree.)
Full Name: TEST

(Do not add saktation for Father's/Mother's name)
Father's Name: TEST, Mother's Name: TEST

Nationality: Indian OCI Other
Applied Under: General, Marital Status: Married Unmarried
Department: Surgical Oncology

(All CBC Creamy Layer Candidate will be consider as General)
Community: UR OBC(NCL) SC ST
Date of Birth: 31/12/1990, Gender: Male Female Other Gender
DOB: Yes No
ID Proof: Adhar Card, ID No.: 123XYZ
(Please bring along this ID Proof at the time of examination)
Place of Issue: NEW DELHI, Issue Date: # 30/12/2014
Valid Till: # 14/12/2016

Contact Details

(Your Email ID and Mobile Number will be used for Communication and Notification through SMS and E-mail)

Email ID: deepak.fullan@diguniv.com, Confirm Email ID: deepak.fullan@diguniv.com
Mobile No.: 990013623, Confirm Mobile No.: 990013623
Please enter your 10 digit mobile number only. Don't add 'E' or '+91' before it. For Landline number please enter the 'STD' code of that area.
Alternate Number: # Mobile Landline

Address Details

Correspondence Address	Permanent Address
Address Line 1: D-217 DDA FLATS BINDAPUR	<input checked="" type="checkbox"/> Same as Correspondence Address
Address Line 2 #: UTTAM NAGAR NEW DELHI	Address Line 1: D-217 DDA FLATS BINDAPUR
Address Line 3 #:	Address Line 2 #: UTTAM NAGAR NEW DELHI
Country: India	Address Line 3 #:
State: Delhi	Country: India
City: New Delhi	State: Delhi
Pincode: 110059	City: New Delhi
Enter Captcha: 10530	Pincode: 110059

Note: Fields Name, DOB, Community and OPN cannot be changed after payment. Please give due attention while filling these informations.

Declaration of Eligibility: Kindly read the declaration carefully and give consent on it.
 I, hereby declare that the information filled in the form is correct and true to best of my knowledge. I further declare that I understand and fulfil the eligibility condition for AIIMS Ph.D Registration as mention in the prospectus.

Update

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After click on **Update** button, Candidate will be navigated to **Candidate Dashboard Page**

Step 2: Qualification Details

After first step of registration process is completed, the next step is to fill **Qualification Details**. Candidate should fill all the information asked for regarding Qualifying Examination, Internship and Medical Registration. After fill all required filled then click on **Save and Proceed** button.

All India Institute Of Medical Sciences Helpline No.: 8510010247, 9582949110

WELCOME: TEST CANDIDATE ID:300033 Mon May 02 2016 17:08:57 GMT+0530 (India Standard Time)

Logout My Page

1 Registration 2 Qualification Details 3 Experience Details 4 City Choice 5 Make Payment 6 Upload Images 7 Print Registration Form

Qualification Details

Under Graduate Qualification Details

Degree Name	MBBS		
Degree From	<input checked="" type="radio"/> Indian University <input type="radio"/> Foreign University		
State Name	1 - Andhra Pradesh	University Name	GDF
Institute/College Name	NRI Medical College, Guntur Kappa		
Admission Date (dd/mm/yyyy)	13/02/2007	Passing Date (dd/mm/yyyy)	11/05/2009

Qualifying Examination Details

Qualification Status	<input checked="" type="radio"/> Completed <input type="radio"/> Pursuing		
Degree Name	MBBS		
Degree From	<input checked="" type="radio"/> Indian University <input type="radio"/> Foreign University		
State Name	10 - Himachal Pradesh	University Name	YTRPD
Institute/College Name	Dr. Rajendra Prasad Government		
Admission Date (dd/mm/yyyy)	19/03/2004	Passing Date (dd/mm/yyyy)	15/05/2010

MBBS Internship Details


MBBS Internship Status	<input checked="" type="radio"/> Completed <input type="radio"/> Undergoing		
Internship Start Date	17/02/2009	Completion Date	24/05/2010
No. of Days	92		

Qualifying Examination Academic Details

<input checked="" type="radio"/> Percentage <input type="radio"/> CGPA		
Marks Obtained	Max Marks	Percentage(%)
68	100	68.00

Medical/Nursing Registration Details

Registration Type	<input checked="" type="radio"/> Permanent <input type="radio"/> Provisional		
Registration Date	08/03/2016	Registration Number	32154
Registering Authority	MCI		


Save & Exit **Save & Proceed**

Click on **Save and Proceed Button** to fill Experience Details.

Step 3: Experience Details

After fill the Qualification Details, next step is **Experience Details**. Candidate has to fill requirement details related to Experience as desired according to the course applied for.

1 Registration2 Qualification Details3 Experience Details4 City Choice5 Make Payment6 Upload Images7 Print Registration Form

Experience/Employment Details

Do you have work experience? Yes No

Are you currently in service with Government institute/Hospital Yes No

Institute/Hospital Name:

Experience as:

Position Held:

Period From:

Period To:

Nature Of Duties:

[+ Add](#)

S.No.	Remove	Name of Hospital/Institute	Experience as	Position Held	Period From	Period To	Nature of Duties
1		A.I.M.S	Junior Resident	Junior Resident	01/05/2015	03/05/2015	Hospital Duty

[Save & Exit](#)[Save & Proceed](#)



Step 4: City Choice

The Fourth step is **City Choice**. After filling Experience details candidate will be directed to **City Choice Page**.



The screenshot shows a registration process with seven steps: 1. Registration, 2. Qualification Details, 3. Experience Details, 4. City Choice, 5. Make Payment, 6. Upload Images, and 7. Print Registration Form. The 'City Choice' step is highlighted in red. Below the progress bar, there is a section titled 'Center Choice' with a dropdown menu showing 'Delhi (NCR)'. A note at the bottom of the page states: 'NOTE: The city for Examination once chosen and confirmed after submission of fee will not be changed. Applicants should therefore choose a city if available (from available vacant slots). **Exam city allocation is subject to payment confirmation.** It may be noted that although AIIMS will make all efforts to ensure that the candidate is allotted a center in the cities chosen by the applicant, due to circumstance such as lack of sufficient number of candidates, logistic-administrative and other reasons, an Examination Center in another city may be allotted finally. Applicants are therefore required to be prepared to appear for the examination in the Examination Center allotted to them.' A blue 'Proceed' button is located at the bottom right of the page, with a white arrow pointing to it from below.

Click on **Proceed** button for payment of Registration Fee.

Step 5: Make Payment

After Centre Choice, candidates will be navigated to **Payment** page to make payment of registration Fee. Payment of registration fee can only be done through **Online Mode i.e. Debit/Credit card and Internet Banking.**

भारतीय स्टेट बैंक
State Bank of India
The Answer to Every Indian

Login

Username:

Password:

Remember Me

Online Virtual Keyboard

Warning: Bank accounts marked with an asterisk (*)

Disclaimers: The entity of electronic transfer you and the service provider Bank is on facilitating a payment transaction and is not responsible for any delivery issues etc., however, we make

1. Mandates to be entered with an asterisk (*)

2. Correctly provide your mandate and account details when using this page

3. You can view and download the highly sensitive New payment details from the user interface for the transaction

Login with your credentials of net banking for fee payment, and click on submit button to proceed for payment.

भारतीय स्टेट बैंक
State Bank of India
The Answer to Every Indian

Welcome : Mr. D

Your previous visit was on: 08 Oct 2016 16:50 IST

All India Institute Of Medical Sciences

You can debit any of your transaction accounts to pay All India Institute Of Medical Sciences.

Select an account and enter All India Institute Of Medical Sciences payment details:

Account No. / Web name	Account Type	Branch
0000001616188101	Savings Account	SRM 1004400 - CHENNAI, N.M.C.T. II

Selected Account: 0000001616188101

Payment details

You Reference No: 000016188101

Amount: |

DD: |


DDC: |

DDF: |

Linked URL: <http://www.allindiaonline.org/Payment/Bank/PaymentDetails.aspx>

Amount in words: One rupee only

Warning: Bank accounts marked with an asterisk (*)


भारतीय स्टेट बैंक
State Bank of India
With you - all the way

Welcome to State Bank of India's Secure Payment Gateway

Dear Customer,
SBI Payment Gateway will receive your payment to **AIMS**.

Select the type of card*

Card Number*
(Please enter your card number without any spaces)


Expiry Date*
(Please enter expiry date provided on your card)

CVC2 / CVC2 / CVC2 Number*
(CVC2 / CVC2 / CVC2 is the three digit security code printed on the back of card)

Name on Card





Purchase Amount **INR 1000**

Word Verification*
you the characters you see in the picture below


3-Digit Card Verification Number

↑
AFTER PRESSING PAY, KINDLY DO NOT REFRESH AND DO NOT PRESS THE BACK BUTTON.

ALL INTERNET BASED TRANSACTIONS USING STATE BANK DESI/ CARDS WOULD NEED A 3D SECURE PASSWORD.

A secured through to you by State Bank of India

Note: This page will expire in 30 minutes and if you fail to complete the transaction in 30 minutes, you will be redirected to the order page of AIMS.
If you want to discontinue with the order request you to click on Cancel button, you will be redirected to the order page of AIMS.

Candidate should enter the information asked for to pay through on line mode and click on **PAY** button.

Candidate must remember to take printout of Payment Receipt as a proof of payment by clicking on **Print** button.

Logout My Page



General Links:

- [Home](#)
- [Notifications](#)
- [Advertisement/Compendium](#)
- [Registration](#)
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- 1 Registration
- 2 Qualification Details
- 3 Exam Fees Details
- 4 City Centre
- 5 Make Payment
- 6 Upload Images
- 7 Fill Feedback Form

ALL INDIA INSTITUTE OF MEDICAL SCIENCES
 Ansari Nagar, New Delhi - 110008

Payment Receipt

Ph.D. Programme, Jan 2017

Candidate ID: 00000	
Candidate Name: JPU	Registration No: 18000
Date of Birth: 03/11/1987	Category: UR
Gender: Male	Emergency Contact: Yes
Applied Under: Sponsored	Department: Gastroenterology

Amount: Rs. 0.00

Mode of Payment: Credit Card	Card: 0000000000000000
Transaction ID: 0	Status: Success

[Printed](#)

Step 6: Upload Images

After Successful Payment Confirmation, Candidate needs to upload their latest passport size Photograph, Signature and Thumb Impression. The supported digital image format includes gif, png, jpg/jpeg.

Upload Images

All India Institute Of Medical Sciences

Welcome: R Candidate ID: 0711000072 Register No: 0010010047, 000000100

Logout My Page

General Links

- Home
- Change Password
- Notification
- Admission
- Competition/Admission
- Introduction
- Upload Image Instructions
- Registration Login
- Help Manual

1 Registration 2 Qualification & Address Details 3 Experience Details 4 Make Payment 5 City Choice 6 Upload Images 7 Print Registration Form

Upload Photo

photograph once uploaded cannot be changed, unless rejected by AIIMS.

Choose file / No file chosen

- The uploaded photograph is not more than six months old.
- Background colour of photograph is white.
- Photograph is not blurred.
- Photograph size is as per instructions.
- The Photograph is male.

Accept

Instructions for photo upload:

1. Size is less than 3.5 cm horizontal and 4.5 cm vertical size. (3.5cm X 4.5cm)
2. Paste the photo on the face shown. The photo should have white back ground and should be taken professionally, as that it may not get after emerging. (Photograph must be taken within six months from when registration opening date). The Photograph should fit the entire box.
3. Scan the box, containing the photo pasted on the white sheet at 300 dpi. During scanning most software allows selection of the desired area for that scanning after which process is done.
4. Save the scanned image as jpg/png/gif or "Photograph.jpg" or "Photograph.png" or "Photograph.gif" or "Photograph.png".
5. Size of the scanned image should be between a minimum of 50 KB and maximum of 100 KB.

Upload Signature

Signature once uploaded cannot be changed, unless rejected by AIIMS.

Choose file / No file chosen

- Background color of signature is white.
- Signature is not blurred.
- Signature size is as per instructions.
- The Signature is male.

Accept

Instructions for Signature upload:

1. Give a box of 4.5 cm horizontal and 5 cm vertical size on a white paper sheet.
2. Take a black ball pen/brush and sign (professionally handwritten name).
3. The scanned file for signature should be clear without covering.
4. Following steps of signature are to be followed:

- Signature in ordinary ink/pen only
- Signature in CAPITAL LETTERS
- Signature with underlining.

1. Give a box of size 5 cm horizontal and 5 cm vertical (5cm X 5cm).
2. Give a box of size 5 cm horizontal and 5 cm vertical (5cm X 5cm).
3. Sign inside the box, shown only. Signature should be clear without covering.
4. Scan the box, containing the signature only, not the white sheet at 300 dpi. During scanning most software allows selection of the desired area for that scanning after which process is done.
5. Save the scanned image as jpg/png/gif or "Signature.jpg" or "Signature.png" or "Signature.gif" or "Signature.png".
6. Size of the scanned image should be between a minimum of 50 KB and maximum of 100 KB.

Upload Left Thumb Impression

Left Thumb Impression once uploaded cannot be changed, unless rejected by AIIMS.

Choose file / No file chosen

- Background colour of Thumb Impression is white.
- Thumb Impression is not blurred and lines are clearly visible.
- Thumb Impression size is as per instructions.
- The Thumb Impression is male.

Accept

Instructions for Thumb Print upload:

1. Give a box of 4 cm horizontal and 5 cm vertical (4cm X 5cm).
2. Left thumb impression is required. Use a standard ball pen for the thumb impression.
3. Put your thumb print on the face shown on paper sheet. (It will come thumb on face) or (in) or (out) or (in) or (out) on a sheet of paper below here so that the right amount of pressure is applied to obtain a clear impression of the flesh/corn of thumb impression. Please ensure that this ink is on the center area of the thumb required for the impression.
4. Scan the box, containing the Thumb print only, not the white sheet at 300 dpi. During scanning most software allows selection of the desired area for that scanning after which process is done.
5. Save the scanned image as jpg/png/gif or "Left Thumb Impression.jpg" or "Left Thumb Impression.png" or "Left Thumb Impression.gif" or "Left Thumb Impression.png".
6. Size of the scanned image should be between a minimum of 50 KB and maximum of 100 KB.

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/misrepresentative then I shall be liable to disciplinary prosecution and my claims to admission to the Institute may be cancelled/terminated.

Save & Exit Save & Proceed

First read the instructions given regarding **Photo, Signature and Thumb Impression** upload. To upload image click **Choose File button** and browse to path where the image is stored. You can see the preview of the uploaded images. Please refer to **Sample Images** provided on the page, if

you are satisfied with the preview of images, click on **Accept** button else try again to upload the images. After uploading all three required images, give consent on the declaration and click on **Save & Proceed** button. Images once uploaded cannot be changed later so candidates are requested to pay due attention while uploading the images.

Step 7: Print Registration Form

The seventh and the Last Step is **Print Registration Form**. Candidate must take print of Registration Slip once all steps of registration are completed. Click on **Submit** button and take printout of Registration Form.

Registration Form contains all the details provided by candidate during on line registration i.e. Personal Details, Qualification Details, Experience Details, Payment details and Uploaded Images etc.



All India Institute of Medical Sciences
Ansari Nagar, New Delhi - 110008
Entrance Examination - 2017

Registration Form - AIIMS Ph.D. Programme, Jan 2017						
Candidate Profile		Candidate ID: 520023		Registration No.: 100001		
Registration Date: 03/11/2017						
Name: NAG		Date of Birth: 13/07/1987				
Gender: Male		Marital Status: Married				
Father's Name: NAG		Category: UR				
Mother's Name: NAG		Disability Status: Yes				
Applied Under: Sponsored		Department/Project Code: Psychiatry/174 (A)				
Necessity: IICAR		Branch: Non Medical				
Contact Details						
Address for Correspondence: DTY UNY-61, New Delhi, India, 120041			Permanent Address: DTY UNY-61, New Delhi, India, 120041			
Phone No(s): 3, 97111/2505, 3, -			E-Mail ID: oia.mangal.nish@gmail.com			
Qualification Details						
S. No.	Level	Name of Degree	Discipline	University Name	Institution Name	Date of Passing
1	Under Graduate	B.Sc.	NA	LWYBTH	Medina Akshai Medical College & GD Hospital, New Delhi	16/11/2002
2	Qualifying Exam	Medical Degree	Physiotherapy	WCUJLU	University College of Medical Sciences & GTD Hospital, New Delhi	03/11/2008
MDS Internship Details						
S. No.	Status	Start Date	Completion Date	No. of Days		
1	Completed	N/A	N/A	0		
Qualifying Examination Academic Details						
S. No.	Level	Marks Obtained/CGPA	Maximum Marks	Percentage		
1	Percentage	83.00	100	83.00		
Medical/Nursing Registration Details						
Registration Type: Physiotherapist		Registering Authority: N/A		Reg. Date: N/A		
				Reg. No.: N/A		
Experience/ Employment (Beginning with current)						
S. No.	Institute/Hospital Name	Experience as	Position Held	Period From	Period To	Nature of Status
1	ICMR	Respt	Respt/Phd	08/11/2004	05/11/2008	part
Valid Photo Identity (To be presented in original at the Examination Center along with Admit Card)						
Nature of ID: Adhar Card		ID No: 01GH11J		Place of Issue: HYDRAB		
				Issue Date: / /		
				Valid till: / /		
Payment Details						
Mode: Escrowed		Date: 03/11/2017		Transaction ID: 0		
				Amount: 0.00		
Examination Center opted: Delhi-(NCR)						
 Applicant Thumb			 Applicant Signature			
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/wrong/false then I shall be liable to civil/criminal prosecution and my claim to admission/appointment/registration services in the Institute may be cancelled/terminated.						
<input type="button" value="Back"/>		<input type="button" value="Submit"/>				

Check all the details in **Registration Form** carefully, if some entered information is to be corrected/ edited then click on edit button, do the necessary corrections and then click on **Final Submit button**.



All India Institute of Medical Sciences
Ansar Nagar, New Delhi - 110008
Entrance Examination - 2017

Registration Form - AIIMS Ph.D. Programme, Jan 2017

Candidate Profile		Candidate ID: 52002	Registration No.: 100001	Registration Date: 08/01/2017		
Name: FIAG	Gender: Male	Father's Name: FIAG	Mother's Name: FIAG	Applied Under: Sponsored		
Date of Birth: 12/01/1987	Marital Status: Married	Category: UR	Quotity Status: Yes	Department/Project Code: Psychiatry/114 (a)		
Nationality (NCLAY):		Branch: Non-Medical				
Contact Details						
Address for Correspondence: DPT UTMU, New Delhi, Delhi, India, 110047		Permanent Address: DPT UTMU, New Delhi, Delhi, India, 110047				
Phone (No): 1. 9711070225, 2. -		E-Mail ID: ian.mangal.mishra@gmail.com				
Qualification Details						
S. No.	Level	Name of Degree	Discipline	University Name	Institution Name	Date of Passing
1	Under Graduate	B. Sc.	N/A	DWYLU	Madira Arsal Medical College & GS Patel Hospital, New Delhi	08/01/2012
2	Qualifying Exam	Master Degree	Physiotherapy	WU/LSU	University College of Medical Sciences & GGS Hospital, New Delhi	08/11/2009
MSSS Internship Details						
S. No.	Status	Start Date	Completion Date	No. Of Days		
1	Completed	N/A	N/A	0		
Qualifying Examination Academic Details						
S. No.	Level	Marks Obtained/CGPA	Maximum Marks	Percentage		
1	Percentage	65.00	100	65.00		
Medical/Nursing Registration Details						
Registration Type: Physiotherapist	Registering Authority: N/A	Reg. Date: N/A	Reg. No.: N/A			
Experiential Employment (Beginning with current)						
S. No.	Institute/Hospital Name	Experience in	Position Held	Period From	Period To	Address of Office
1	Indra	Physio	Physiotherapist	08/11/2004	08/11/2008	Delhi
Valid Photo Identity (To be presented in original at the Examination Center along with Admit Card)						
Name of ID - Adhar Card	ID No: 57 5217121	Type of Issued: Y19M105	Issue Date	Valid Till		
Payment Details						
Mode: Exempted	Date: 08/01/2017	Transaction ID: 0	Amount: 0.00			
Examination Center opted: Delhi-(NCR)						
						
<p><small>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/incomplete/false then I shall be liable to disciplinary prosecution and my claim to admission/appointment/registration services in the Institute may be cancelled/terminated.</small></p>						
Print		Back		Final Submit		

Take the print of the Registration Slip after final submission of form. Candidate can take the print out of the **Registration Form** by clicking on **Print** button

After clicking Final Submit button, color of navigation bar of all the steps of registration process will change to **Yellow from Red**.



WELCOME: TEST

CANDIDATE ID:300033

Wed May 04 2016 15:23:21 GMT+0530 (India Standard Time)

[Logout](#) [My Page](#)



General Links - I

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Your registration form is under review.

My Details

Candidate ID:	300033	Course Applied:	Ph.D. Programme
Candidate Name:	TEST		
Father's Name:	TEST	Mother's Name:	TEST
Date of Birth:	31-Oct-1990	Category:	UR
Applied Under:	General	Department:	Anatomy
Gender:	Male	ID Proof:	Adhar Card
Nationality:	Indian	Place of Issue:	NEW DELHI
Marital Status:	Unmarried	ID No.:	1234566
OPH:	Yes	Issue Date:	
E-Mail:	ar.deepakfullan@gmail.com	Valid Till:	
Mobile No:	9650453622	Alternate Number:	-

Correspondence Address		Permanent Address	
Address Line 1:	D-217	Address Line 1:	D-217
Address Line 2:	DDA FLATS	Address Line 2:	DDA FLATS
Address Line 3:	DWARKA SEC-2	Address Line 3:	DWARKA SEC-2
Country:	India	Country:	India
State:	Delhi	State:	Delhi
City:	New Delhi	City:	New Delhi
Pincode:	110059	Pincode:	110059

Your Due Steps

✓	Qualification Details	Complete
✓	Experience Details	Complete
✓	Center Choice	Complete
✓	Make Payment	Complete
✓	Upload Images	Complete
✓	Registration Slip	Complete

[Edit](#) [Proceed](#)

After completing all 7 steps of registration candidate will be registered successfully and can navigate to any completed step through **Navigation Buttons** available on top of the page. Candidate should **Logout** after registration is done successfully.