





**KRISHNA INSTITUTE OF MEDICAL SCIENCES  
DEEMED UNIVERSITY, KARAD.**



**Entrance Test Admit Card**

Application Form No.

Unattested  
Recent Photograph  
of the Candidate  
taken within  
last six months

Seat No. Entrance Exam - 2016

Name of the Candidate : \_\_\_\_\_

Address & Telephone No. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Entrance Test Date : 05/07/2016

Entrance Test Time : 11.00 am to 2.00 pm

Entrance Test Centre : Karad

**Competent Authority**