NOTICE Regarding BIBLE TEST II for Christian Minority Candidates for ROUND 2

- A Bible Test II will be held for candidates applying/applied to Baba Farid University of health Sciences for Round 2 counselling under NEET UG 2025.
- Candidates who have a valid sponsorship letter (Letter of Service Commitment) for 2025 Admissions can apply for Bible Test II
- Candidates who have passed Bible Test I need not appear for this test.
- Kindly refer to Information Bulletin for MBBS/BDS Admission 2025 available at www.cmcludhiana.in

Date of Bible Test II: 28th August 2025 Time: 12:00 PM

Test Centre: Christian Medical College Ludhiana

Such Candidates should fill the Bible Test II form attached with this document (pg 2&3) and send it before due date to Registrar, CMC Ludhiana as per the instructions given in the form.

For any query/Clarification Call at Registrar office 0161-5010809 or 0161-2115381

NOTE: Due to the high volume of work and tight deadlines during the admission and counselling period, in case of any issue we advise contacting the Office of the Registrar either in person or by phone. Please be aware that email queries may not be addressed immediately. We appreciate your patience and understanding during this time.



CHRISTIAN MEDICAL COLLEGE LUDHIANA SOCIETY

APPLICATION NO. (For office use only)

APPLICATION FOR BIBLE TEST – MBBS/BDS 2025 'CHRISTIANS WITH SERVICE COMMITMENT CATEGORY'

FILL IN DETAILS IN CAPITAL LETTERS ONLY

STAPLE THREE PASSPORT SIZE PHOTOGRAPHS

| NEET DETAILS | |) () DYG | | |
|---|---------------|-------------|-------------------------------|------|
| ROLL NUMBER | | MARKS | ALL INDIA RAI | √K |
| | | | | |
| BFUHS REGISTRATION ID | | | | |
| PERSONAL DETAILS | | | | |
| NAME OF FATHER: | | | | |
| NAME OF MOTHER: | | | | |
| DATE OF BIRTH : | | GENDER: MAL | E / FEMALE (Please Circle / T | ick) |
| | MEMBER OF W | HICH | | |
| DURATION OF MEMBERSHIP: | | DATE | OF BAPTISM: | |
| STATE OF DOMICILE: | | | | |
| CORRESPONDENCE ADDRESS: | | | | |
| | | | | |
| TELEPHONE NO. RESIDENCE (W | TTH STD CODE) | MOBILE | ALTERN | ATE |
| EMAIL ID: | | | | |
| EWAIL ID. | | | | |
| COURSE APPLYING FOR (Please tick) | MBBS | | BDS | |
| NAME OF CHURCH/MEMBER BO WITH WHOM THE CANDIDATE I | MDDC. | | | |
| SIGNING THE SERVICE AGREEM WITH | ENT BDS: | | | |

| COURSE | CATEGORY THE CANDIDATE IS APPLYING IN (Refer to the Footnote & Circle the appropriate category, as per eligibility) | | | | | | |
|--------|---|----|----|----|----|----|----|
| MBBS | 2A | 2B | 2C | 2D | 2E | 2F | 2G |
| BDS | 2A | 2B | 2C | 2D | 2E | 2F | 2G |

Foot Note: **A** - Punjab; **B** - Andhra Pradesh, Karnataka, Kerala, Puducherry, Tamil Nadu, Telengana; **C** - Goa, Maharashtra, Gujarat, Daman & Diu, Dadra & Nagar Haveli, Rajasthan, Lakshadweep; **D** - Madhya Pradesh, Chhatisgarh, Orissa, Jharkhand, West Bengal, Andaman & Nicobar Islands; **E** - Uttar Pradesh, Bihar, Uttarakhand, Arunachal Pradesh, Assam, Meghalaya, Manipur, Mizoram, Nagaland, Sikkim, Tripura; **F** - Jammu & Kashmir, Ladakh, Himachal Pradesh, Delhi, Haryana, Chandigarh; **G** - Service Commitment with CMC Ludhiana & Its Outreach Centers. Candidates applying in the 2G category should have their forms endorsed by the Director, Christian Medical College Ludhiana.

ACADEMIC DETAILS

| | BOARD | YEAR OF PASSING | STATE FROM WHERE COMPLETED | RESULT (CGPA/PERCENTAGE) |
|---------|-------|--------------------|-------------------------------|-----------------------------|
| X STD | | | | |
| XI STD | | | | |
| XII STD | | | | |

TRANSACTION DETAILS Bible test application fee is to be paid in the following account no.

ACCOUNT NO. FOR PAYING FEE FOR BIBLE TEST (RS. 2500)

BENEFICIARY NAME: CHRISTIAN MEDICAL COLLEGE LUDHIANA SOCIETY

BENEFICIARY ACCOUNT NUMBER: 9991599999990

BENEFICIARY BANK NAME: HDFC Bank

IFSC CODE: **HDFC0000034**SWIFT CODE: **HDFCINBB**

DECLARATION

I hereby declare that I have read the Instructions in its entirety

I hereby declare that I am an Indian National

I understand that the Application Fee once paid is not refundable. I hereby declare that the Information provided by me is true and correct to the best of my knowledge. I further declare that I will provide the original of all certificates, relevant to the claims made by me, at the time of admission. I agree to forfeit my claim to admission in the event any information provided by myself is found to be false or I am unable to produce the relevant original certificates.

ENCLOSURES: Copies of: 1. Church Membership Certificate (As per format); 2. Baptism Certificate; 3. Domicile Certificate; 4. Letter of Service Commitment (from Church/Member body of CMC Ludhiana Society with whom signing the Service Agreement and signed by Authorized Signatory only). 5. NEET Score.

Scan the form , enclosures and send by mail to registrar@cmcludhiana.in by 28th August 9.00 AM (Refer to UG MBBS BDS 2025 Information Bulletin for details)

Ensure this form with enclosures reaches the Office of the Registrar, CMC Ludhiana, PIN 141008, Punjab by Courier/ by hand before the deadline.

NAME SIGNATURE DATE

SAMPLE

CHURCH MEMBERSHIP CERTIFICATE

(This information is for MBBS/BDS Admissions 2025-CMC, Ludhiana.)

| Name of the Candidate |
|---|
| Date: |
| Father's Name: |
| Mother's Name: |
| Address: |
| This is to certify that, as per our church records, Mr./Ms is a |
| member of our Church fromtill He/She is communicant/non- |
| communicant member. |
| Name of the Church: |
| Address of the |
| Church: |
| |
| Telephone No: E mail address: |
| Name of the Presbyter* Incharge of the Church: |
| |
| Address: |
| Telephone No: |
| E mail address: |
| Head of the Church**:Telephone |
| Head Office of the Church |
| (Address) |
| Signature of Pastor/Presbyter* Incharge of the Church with official seal & date |
| Verified the Signature & details of the Presbyter-in-charge of the Church |
| Signature of Head of the Church**: with official seal & date |
| * Presbyter / Minister / Reverent / Pastor / Vicar ** Bishop / Senior Presbyter / Senior Pastor / Senior Minister |

(It is important to have both signatures with the particulars, otherwise it is not valid)