



## म०प्र० आयुर्विज्ञान विश्वविद्यालय, जबलपुर (म.प्र.)

क्रमांक / म.प्र.आ.वि.वि. / परीक्षा / 2023 / 4681

जबलपुर, दिनांक 18 / 04 / 2023

### अधिसूचना

म०प्र० आयुर्विज्ञान विश्वविद्यालय, जबलपुर द्वारा **B.Sc Nursing 3<sup>rd</sup> Year Examination May-2023** की समय सारणी हेतु निम्नानुसार तिथियाँ निर्धारित की जाती हैं:-

#### B.Sc Nursing 3<sup>rd</sup> Year Examination May-2023 Time Table

S.No	Date	Day	Time	Subject
1	26/05/2023	Friday	10:00 AM To 01:00 PM	Medical Surgical Nursing - II
2	30/05/2023	Tuesday	10:00 AM To 01:00 PM	Child Health Nursing
3	02/06/2023	Friday	10:00 AM To 01:00 PM	Mental Health Nursing
4	05/06/2023	Monday	10:00 AM To 01:00 PM	Nursing Research & Statistics

#### • Fee Details:-

S.No.	Course	Exam Fee	Form Fee	Total fee if form received on or before 10/05/2023	Total Fee if Form Received on or before 12/05/2023 (Late Fee 500/-)
1	B.Sc Nursing 3 <sup>rd</sup> Year Examination (04 Theory, 03 Practical) Fee for one paper is Rs. 350 and Fee for one Practical is Rs. 100	1700/-	100/-	1800/-	2300/-

- विद्यार्थियों कि Exam Fees Online Portal द्वारा भरी जानी है।
- Online Examination Form भरे जाने हैं जिस हेतु निम्न लिंक हैं:-  
<http://mpmsu.intelliexams.com/MPMSUEXAMS/LoginScreens/LoginPage.aspx>  
उपरोक्त लिंक विश्वविद्यालय की वेबसाइट <https://www.mpmsu.edu.in/> पर Announcement Section > Online Link for Exam Form Filling पर उपलब्ध है।

(माननीय कुलपति महोदय द्वारा अनुमोदित)

परीक्षा नियंत्रक  
म.प्र. आयुर्विज्ञान विश्वविद्यालय  
जबलपुर  
जबलपुर, दिनांक 18 / 04 / 2023

पृ.क्रमांक / म.प्र.आ.वि.वि. / परीक्षा / 2023 / 4681-A  
प्रतिलिपि:-

1. माननीय कुलपति / कुलसचिव कार्यालय, म०प्र० आयुर्विज्ञान विश्वविद्यालय, जबलपुर।
2. समस्त अधिष्ठाता / प्राचार्य संबद्ध महाविद्यालय।

उप कुलसचिव  
म.प्र. आयुर्विज्ञान विश्वविद्यालय  
जबलपुर

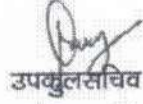
# मध्यप्रदेश आयुर्विज्ञान विश्वविद्यालय जबलपुर (म.प्र.)

कमांक/मप्रआवि/परीक्षा/2022/6484

जबलपुर, दिनांक 19.05.2022

## अधिसूचना

म०प्र० आयुर्विज्ञान विश्वविद्यालय, जबलपुर से संबद्ध समस्त महाविद्यालयों को निर्देशित किया जाता है कि अपने विद्यार्थियों के परीक्षा फार्म (Examination Form) अत्यंत सावधानीपूर्वक भरकर अशेषित करें। परीक्षा हेतु विद्यार्थी की अर्हता एवं परीक्षा फार्म की समस्त फील्ड की जाँच कर लें। महाविद्यालय द्वारा अशेषित अनुमोदित (Approved) परीक्षा फार्म के अनुसार विश्वविद्यालय द्वारा कार्यवाही की जायेगी। किन्हीं भी कारणों से परीक्षा फार्म भरते समय यदि कोई त्रुटि पाई जाती है, तो तत्काल विश्वविद्यालय से चर्चा कर परीक्षा फार्म अनुमोदित (Approved) करने से पूर्व त्रुटि सुधारकर अशेषित करें। इसके उपरांत किसी भी प्रकार का परिवर्तन स्वीकार नहीं किया जायेगा, जिसकी पूर्ण जिम्मेदारी संबंधित महाविद्यालय की होगी।



उपकुलसचिव

म०प्र० आयुर्विज्ञान विश्वविद्यालय  
जबलपुर

पृ.क./मप्रआवि/परीक्षा/2022/6484

प्रतिलिपि:—समस्त संबद्ध महाविद्यालय, म०प्र० आयुर्विज्ञान विश्वविद्यालय, जबलपुर।



प्रभारी परीक्षा नियंत्रक

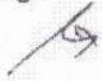
म०प्र० आयुर्विज्ञान विश्वविद्यालय  
जबलपुर

जबलपुर, दिनांक 19.05.2022



सहायक कुलसचिव

म०प्र० आयुर्विज्ञान विश्वविद्यालय  
जबलपुर



# Exam Form Filling Manual Version1.1\_19-04-2023

## Process Flow

परीक्षा फार्म भरने हेतु महाविद्यालय XY000E0 वाली आईडी का उपयोग करें तथा प्राचार्य द्वारा approval हेतु XP000P0 वाली आईडी का उपयोग करें।

Selection details:

1. Select 'Exam application entry' from student main menu.



- 1) Select required 'Faculty name' from the drop down filed list such as UG/PG etc
- 2) Select required 'Degree or branch name' from the drop down filed list such as MBBS etc
- 3) Select required 'Exam name' from the drop down filed list such as MBBS First prof, Examination April-2023 etc
- 4) Select required 'Category of examinee' from the drop down filed list such as first attempt or arrear etc
- 5) Enter student register number in the 'Enrolment No' to validate and apply for student exam application.
- 6) Click on 'View' button to load the student personal and academic details or Clear button to reset the above made selections to default.

**Exam Application Entry**

This module is used to apply for exam.

College*	PG02 - NSCB MEDICAL COLLEGE ENT DEPARTMENT JABALPUR
Faculty Name*	---Select---
Degree / Branch Name*	---Select---
Exam Name*	---Select---
Category of Examinee *	---Select---
Enrolment No.*	<input type="text"/>

Helpdesk No: **9244008785**

Kindly use browser : Google Chrome or Mozilla Firefox

- 7) To proceed for filling exam application Click on User will be able to view student general details such as: - Student enrolment number - Student full name, Father and mother name - Student photo and signature - Caste category of the student - Address details - Pin code, Contact details, Email and DOB.

Not secure | mpmsu.intellexams.com/MPMSUEXAMS/LoginScreens/LoginPage.aspx

Student Signature *	Choose File No file chosen	UPLOAD	Signature should be below 20KB
Student Thumb Impression *	Choose File No file chosen	UPLOAD	Thumb Impression should be below 20KB (Note: Left hand Thumb Impression)
Caste Category *	<input type="radio"/> GENERAL <input type="radio"/> SC <input type="radio"/> EBC <input type="radio"/> BC <input type="radio"/> ST <input type="radio"/> Pw <input type="radio"/> OH <input type="radio"/> OBC	Sex *	<input type="radio"/> Male <input type="radio"/> Female <input type="radio"/> Transgender
Correspondence / Permanent Address *			
Pincode *	122400	Date Of Birth *	05/11/1998
Mobile No *	+91 9800000000	Email Address *	xyz@gmail.com
Aadhaar No *	120405789023		

10) From the **Subjects offered** grid, user can select the subject details of the student for which the application is applied

11) Attendance in percentage "Theory" (i.e. 90) and Attendance in percentage "Practical" (i.e.90) given in photo

Subjects offered	percentage for Practical
<input type="checkbox"/> 16P27101 Exercise Physiology & Nutrition	90
<input type="checkbox"/> 16P27102 Physical Diagnosis & Rehabilitation	90
<input type="checkbox"/> 16P27104 Orthopaedic Physiotherapy	90
<input type="checkbox"/> 16P27106 Advanced Physiotherapeutic in Orthopaedic Physiotherapy	90
<input type="checkbox"/> 16P27113 Dissertation	90

From the Payment details Section, user can select the enter the below details –

- 1) Mode of payment 2) Fee amount

Payment Details	
Select Payment Mode *	Online Payment
Fee amount *	11.00

From the 'Eligibility criteria details Section, user can select the below mentioned details - Qualifying exam entrance name - Year - Marks obtained & Max marks - Roll no - Rank - DME allotment letter

Note: These are optional field for the user

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Eligibility Criteria Details			
Qualifying Entrance Exam name*	<input type="text" value="M"/>	Roll No.*	<input type="text" value="22145"/>
Year*	<input type="text" value="2022"/>	Rank*	<input type="text" value=""/>
Marks Obtained*	<input type="text" value="65"/>	Out of*	<input type="text" value="100"/>
DNE allotment letter*	<input type="text" value="no"/>		

FOR THE USE OF INSTITUTION OFFICE:			
Fulfills attendance criteria*	<input type="text" value="no"/>	Fee Receipt No.*	<input type="text" value="no"/>
Class XII Mark sheet Copy*	<input type="text" value="no"/>	Migration certificate Original*	<input type="text" value="no"/>

**Declaration By the Candidate**

- I am aware that, I have to fulfil criteria of attendance by the University/MCI, failing which I shall be held "Not Eligible" and will not be allowed to appear in Examination.
- I hereby declare that I have gone through the syllabus as prescribed and adopted by the University and relevant rules of the Heads of Posting which are applicable for the examination for which I am appearing and I accept the same without any challenge/objection applicable.
- I shall be responsible if my application form is rejected for any error, wrong or incomplete entries made by me in the examination form.
- I am not admitted to the course after the cut-off date declare by the University for grant of Seat.
- I fulfil all the criteria for the admission to the course as defined by the MCI/University and I am not defying the criteria of the admission order.

**Confirm Application\***  I solemnly affirm that the information given by me in this application form is true and correct. I have read and accept all instructions given with this application form.

SAVE    CANCEL

Next step-click on Yes

Student Full Name *	SANDEEP KUMAR TIWARI	Father's Name *	SANDEEP TIWARI
Mother's Name *	ANITA TIWARI		
Student Photo*	<input type="button" value="Choose File"/> No file chosen <input type="button" value="UPLOAD"/>		
Student Signature *	<input type="button" value="Choose File"/> No file chosen <input type="button" value="UPLOAD"/>		
Student Thumb Impression *	<input type="button" value="Choose File"/> No file chosen <input type="button" value="UPLOAD"/> Kindly re-verify the details given by you are correct. If "Yes" Click to confirm always "No"? <input type="button" value="Yes"/> <input type="button" value="No"/>		 [Note: Left Hand Thumb Impression]
Caste Category *	<input type="radio"/> GENRAL <input type="radio"/> SC <input type="radio"/> ST <input type="radio"/> BC <input type="radio"/> OBC <input type="radio"/> UR <input type="radio"/> EWS	Sex *	<input type="radio"/> Male <input type="radio"/> Female
Correspondence / Permanent Address *	<input type="text" value=""/>		
Pincode *	<input type="text" value="471005"/>	Date Of Birth *	<input type="text" value="20021208"/>
Mobile No *	<input type="text" value="901 6666666"/>	Email Address *	<input type="text" value="tyy@gmail.com"/>
Aadhaar No *	<input type="text" value="123456789"/>		

**Subjects Offered**

Subject Code	Subject Name	Attendance eligible for Theory	Attendance eligible for Practical	Attendance percentage for Theory	Attendance percentage for Practical
CGM303					

Payment Option- Click on "Pay Now"

**Madhya Pradesh Medical Science University, Jabalpur(M.P.)**

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**Online Payment**

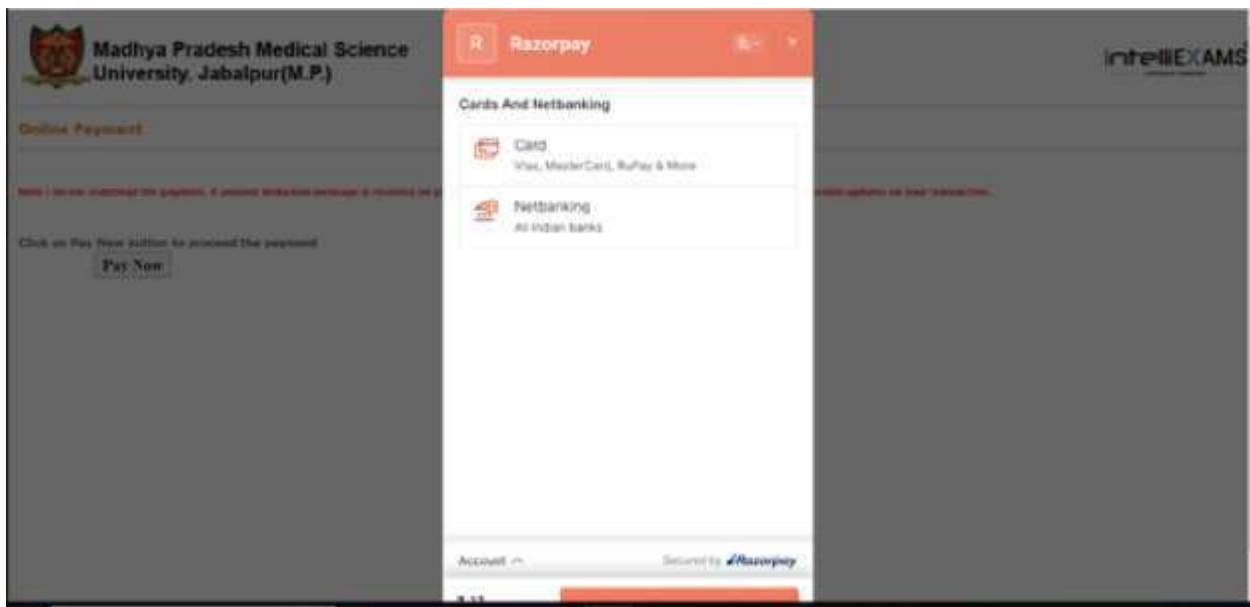
Note: It is not enough to pay the amount, if amount distribution message is received on your registered mobile number, kindly wait for minimum of 20 minutes for further update on your transaction.

Click Pay Now button to proceed the payment

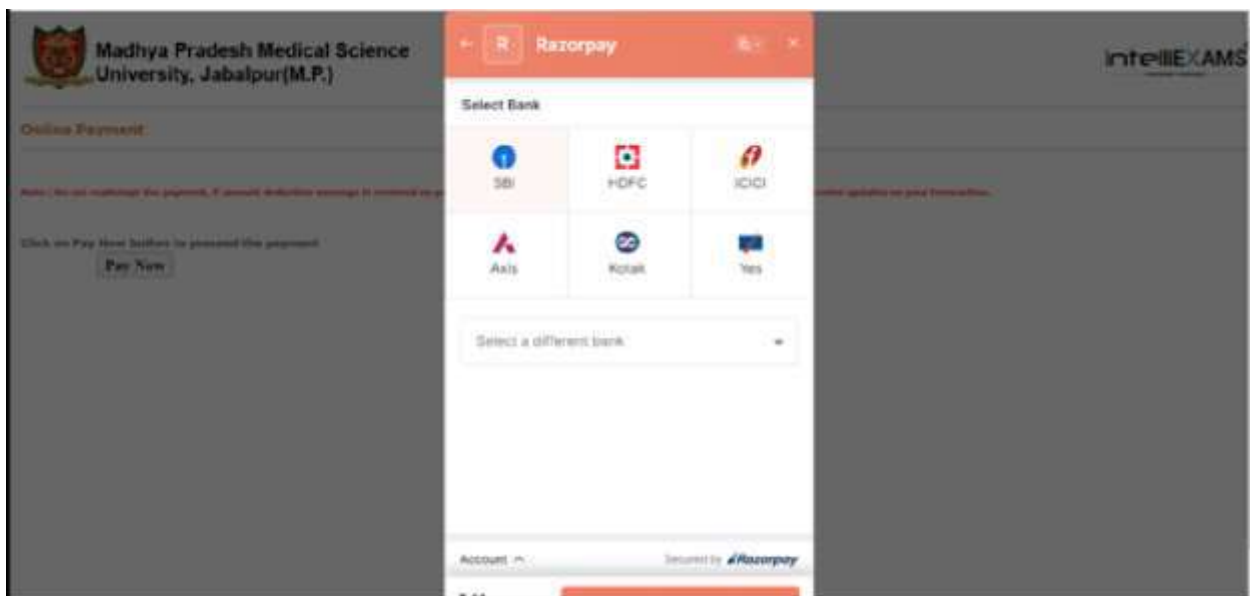
Next step

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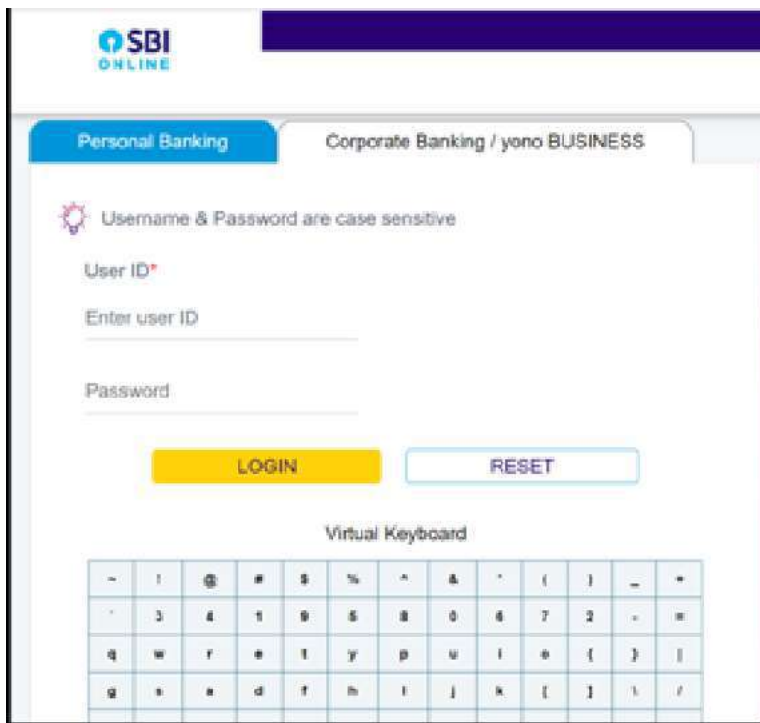
Next step- At present only “Netbanking” options working.



Next step

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