Office of the Chairman, NEET PG Medical & Dental Admission/Counseling Board-2020 and

Principal, Govt. Dental College, Subhash Nagar, Behind T.B. Hospital, Jaipur, Rajasthan

Phone: 0141-2280090

NEET PG MEDICAL & DENTAL ADMISSION / COUNSELING 2020 (Rajasthan State)

IMPORTANT INFORMATION AND CHOICE FILLING FORM FOR SENIOR DEMONSTRATOR CANDIDATES REGISTERED DURING 16.07.2020 – 18.07.2020

19.07.2020

Sr. Demonstrator candidates **registered during 16.07.2020 – 18.07.2020** are required to refer the seat matrix available at the website.

They are required to email from their registered email ID (at the helpline email ID rajneetpg2020@gmail.com) the choice filling form (option form) duly completed and signed alongwith all relevant documents for considering allotment under Sr. Demonstrator category, by 11.00 am on 20.07.2020 failing which they will not be considered for allotment under Sr. Demonstrator seat.

The concerned candidates are also required to make themselves available over whatsapp video call / phone call on registered number only from 12.00 noon to 5.00 pm on 20.07.2020 (along with relevant original documents).

Candidates are advised to keep in touch with the website for further announcements.

Chairman NEET PG Medical & Dental Admission/ Counseling Board-2020 and Principal, Govt. Dental College, Jaipur

Office of the Chairman, NEET PG Medical & Dental Admission/Counseling Board-2020 and Principal, Govt. Dental College, Subhash Nagar, Behind T.B. Hospital, Jaipur, Rajasthan

NEET PG MEDICAL & DENTAL ADMISSION / COUNSELING 2020 (Rajasthan State)

Choice Filling Form (Option Form) – Senior Demonstrator

Name					
Registration ID					
NEET roll no.				NEET score	
Category				NEET rank	
Choice No.	Name of course (Specialization)	Recognized/ Permitted	Name of colle	ege	
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					
16.					
17.					
18.					
19.					

I have filled No	ο.	of	choices	in	order	of	preference.
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Declaration:

20.

Signature of Candidate Date:

I declare that the above choices have been filled up by me personally and the entries made are correct.

I have gone through all the rules, information, instructions, notification etc. and I promise to abide by them. I fulfill the prescribed eligibility criteria relating to educational qualification etc. for the course(s) I am applying for.