			MAHA	RASHTI	RA UNI	VERSIT	Y OF	HEALTH	SCIENC	CES, NASHIK	Appendix-	
						JNSELING						
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01.		f College		· · ······								
)2.	Name of Student Name of Course											
)3.				:							• • • • • • • • • • • • • • • • • • • •	
)4.	Date of Admission to 1 <sup>st</sup> year											
)5. )6.	Category of payment Percentage of Marks				: Free / Payment / NRI : SSC :HSC :07. Marks at CET :							
)8.		erit Number	:									
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	xaminati		candidate i	11 1116 16	151							
			college t	o impro	ve .							
	Efforts taken by the college to improve :performance of the candidate.											
	Hade the college organized interaction with :											
	the parents about poor performance of											
st	udent?											
4. V	Vhether extra classes / revision classes :											
	were conducted for student who had failed											
	n the last examination.											
in		15. Whether the student is made aware of the :										
in 5. W	/hether t		fact of maximum no. of attempts permitted by Central Council / MUHS / College									
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B) Whether the student was getting any financial assistance / scholarship etc., please specify:
Any health problem with the candidate?:
Whether Counseling of student & parent has been done before sending the application form? If yes,
a) Signature of the student:
b) Signature of parents:

17.

- 18.
- Counseling of student done by: 19.
- 20. The above information is correct to the best of my knowledge.

Signature of the Dean / Principal