



THE WEST BENGAL UNIVERSITY OF HEALTH SCIENCES

DD – 36, Sector – 1, Salt Lake, Kolkata 700 064

Phone: 2321- 3461, 2334-6602, Ext. 224 & 225

Fax: 2358-0100

Memo No. COE/UHS/1564/2021

Date: 7th October, 2021

NOTICE

It is hereby informed to all intending candidates for M Sc Medical Microbiology course in the different institutions under The West Bengal University of Health Sciences that; applications are invited in the appended proforma to be submitted to the Office of Controller of Examinations, WBUHS.

1. Name of the Course: **M Sc Medical Microbiology**
2. Eligibility Criteria: MBBS / B. Sc. (Hons) degree in any branch of Life Sciences including Biochemistry, Physiology, Microbiology, Botany, Zoology, or B. Sc. (Hons) in Chemistry with Biological Sciences as a pass subject having at least 50% in aggregate in the qualifying examination (45% in case of OBC-A & OBC-B candidates and 40% in case of SC & ST candidates).
3. Available Seats:
 - a) **College of Medicine and JNM Hospital**, WBUHS, Kalyani, Nadia: 10 seats (UR: 5, SC: 2, ST:1, OBC-A:1, OBC-B:1)
 - b) **P G Institute of Medical Sciences**, Durabila, Paschim Medinipur: 20 seats (UR: 20)
 - c) **Midnapore City College**, Paschim Medinipur: 30 seats (UR: 30)
4. Admission Procedure: The intending candidates will have to apply through the proforma appended herein with. The candidates will be selected based on the merit list prepared on marks obtained in the entrance test to be conducted for the purpose. The entrance test will be through **100 MCQs** (set in English language) to be answered in 80 minutes. The standard of questions will be that of the qualifying examinations.
The applications must be accompanied by a demand draft of Rs. Three thousand only (Rs. 3000/-) in favour of The West Bengal University of Health Sciences, payable at Kolkata. The applications are to be submitted at the office of the Controller of Examinations, WBUHS between 10.00 a.m. to 4-00 p.m. on weekdays excepting the Saturdays, Sundays and declared Govt. holidays. The last date of submission of the application form is within **8th November, 2021**. However, the print copies of the application forms will be accepted by post at the office of the Controller of Examinations till 12th November, 2021, provided the draft is purchased on or before 08.11.2021.

The examination will be held tentatively by the end of November, 2021; the exact date, time and venue of which will be intimated in the admit card issued for the admission test. The admit card will be sent to the individual candidates over the e mail provided by them in their applications. The merit list of the candidates will be notified in the website www.wbuhs.ac.in. No personal communication will be made to the candidates regarding this intimation.

5. Counseling / Allotment: The final allotment to the different colleges will be held after verification of documents and counseling through personal appearance; the detailed schedule and mode of counseling will be notified in the website in due course.

All candidates are instructed to submit self-attested photocopy of all the relevant documents and keep a photocopy of the application form with them.



OSD,

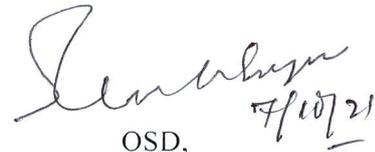
Planning, Development, Examination and Academic Affairs
The West Bengal University of Health Sciences

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Copy forwarded for necessary information to:

1. Registrar, WBUHS
2. Dy. Controller of Examinations, WBUHS
3. Asstt. Controller of Examinations, WBUHS
4. Finance Officer, WBUHS
5. Asstt. Finance Officer, WBUHS
6. Dy. Registrar, WBUHS
7. Asstt. Registrar, WBUHS
8. P.A. to Vice Chancellor, WBUHS
9. P.A. to Pro-Vice Chancellor, WBUHS
10. Office Copy, WBUHS



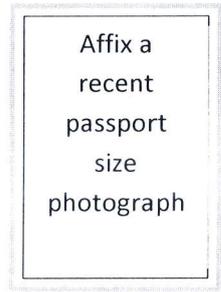
OSD,

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APPLICATION FORM FOR M. Sc. MEDICAL MICROBIOLOGY

REGISTRATION INFORMATION

1. Name:
2. Mother's Name:
3. Gender: M / F / O
4. Date of Birth (DD/MM/YYYY):
5. Mobile No:
6. Mail I.D. :



ACADEMIC INFORMATION

7. Name of Qualifying Examination:

	Aggregate	Total	Percentage
a) _____	_____	_____	_____
b) _____	_____	_____	_____

8. Passing Institution:
9. Year of Passing / Appearing in the Qualifying Examination:
11. Date of completion of Internship:

SOCIAL INFORMATION

12. Nationality:
13. Caste:
14. PWD Status: Yes / No, If Yes, Specify the extent and nature:
15. Communication Address (in full with PIN Code):

INFORMATION OF BANK DRAFT PURCHASED

- Name of the Bank:
Name of the Branch:
Draft No. :

Full Signature of the Candidate