



I.B.E.M- NEW DELHI-94

Indian Board of Electro-Homoeopathic Medicine, New Delhi (Regd. With. NCT of Delhi Govt.)
EHP, System authorised By : Ministry of Health & F.W., Govt. of India (Promotion Development & Research)

ADMISSION FORM

**D.E.H.M / B.E.M.S. / M.D. (EH) Certificate Course
(Distance & Regular Education Programme)**

To
The Registrar,

Sir, I.B.E.M. NEW DELHI -94

Attach 4
Photographs
one should be
pasted here.

I submit the following particular for my admission/examination in above mentioned course
I solemnly declare that the particulars given below are correct to the best of my knowledge and belief.

1. Name of the medical institute : **IBEM/Parth Medical College of Electro Homoeopathy & Other**.....

Dr. Name

Father's/Husband's Name

Date of Birth

Full Permanent Address

State Pin Code

Phone No.

Basic Qualification 10th 12th other

BEMS : 1st YR 2nd YR 3rd YR Final YR

MD.EH : **DEHM :**

Examination Centre **IBEM New Delhi /Parth Medical College of Electro Homoeopathy & Other**.....

Roll No..... Board Enrolment No.....

Sig. of Candidate.....

Checked by.....

College Seal.....

Sig. of Principal.....

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UNDERTAKING

I, S/o Sh.
announcing, taking an oath that today Dated.....shall provide you with
the following detailings related to Electrohomeopathic Medicine as provided by the
Association of Indian Board of Electrohomeopathic Medicine, New Delhi.

- (1) Electrohomeopathy Medical system is still unrecognized as it has not yet relieved accreditation from the Government. These information have been provided to me by the Association and I accede with the informations.
- (2) I have even received this information by the association that according to the orders of respected Supreme of Vide No. V25011/276/2009-HR dated 05/05/2010. There is no Hindrance in practicing and teaching and providing diploma, Certificates through the Electrohomeopathy Medical System.
- (3) The Association has also provided me with the information that this medical system is dependent upon the for i.e. Promotion Development research.
- (4) I hereby declare in my full conscience, that I agree with all the above informations provided to me by the Association. The Association has not withheld any information from me and I am taking admission by my sole wish and resolve to obey and follow each and every rules and regulations of the Association.

Dated :

Signature of Candidate