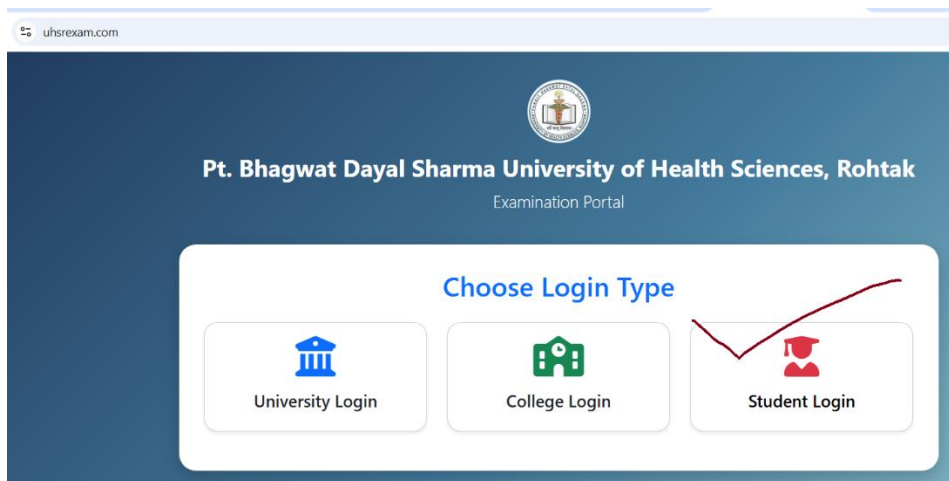


Step 1. Click on the Student Login:



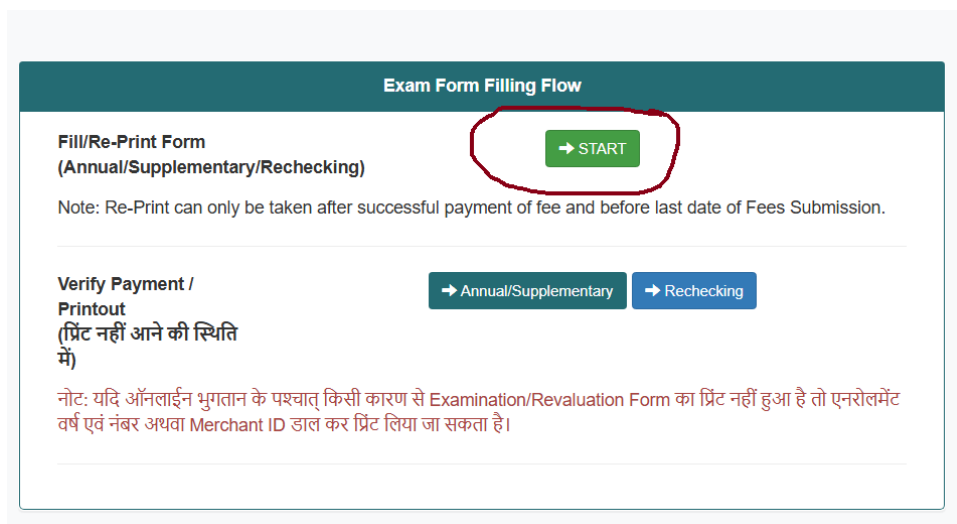
uhsrexam.com

Pt. Bhagwat Dayal Sharma University of Health Sciences, Rohtak
Examination Portal

Choose Login Type

University Login College Login **Student Login**

Step 2. Click on Start



Exam Form Filling Flow

Fill/Re-Print Form
(Annual/Supplementary/Rechecking)

→ START

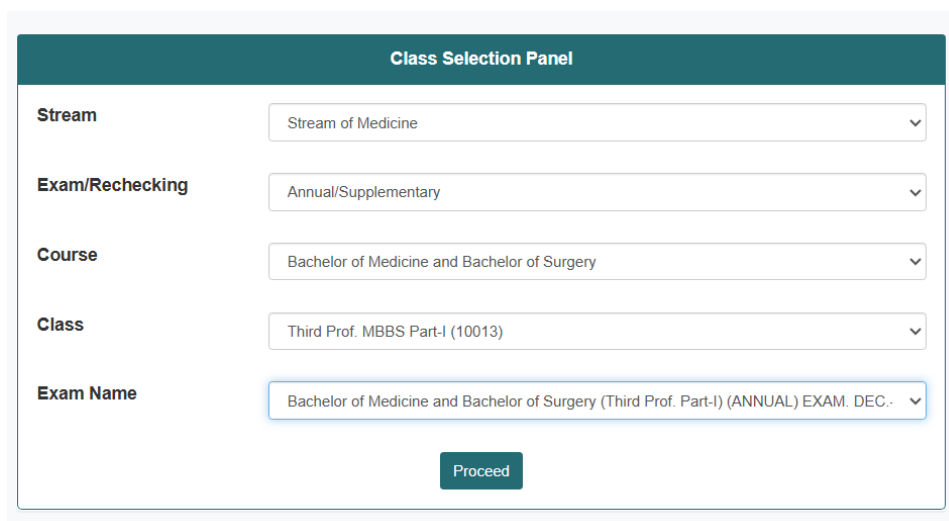
Note: Re-Print can only be taken after successful payment of fee and before last date of Fees Submission.

Verify Payment / Printout
(प्रिंट नहीं आने की स्थिति में)

→ Annual/Supplementary **→ Rechecking**

नोट: यदि ऑनलाईन भुगतान के पश्चात् किसी कारण से Examination/Revaluation Form का प्रिंट नहीं हुआ है तो एनरोलमेंट वर्ष एवं नंबर अथवा Merchant ID डाल कर प्रिंट लिया जा सकता है।

Step 3. Selection of Stream, course, class and Exam details:



Class Selection Panel

Stream Stream of Medicine

Exam/Rechecking Annual/Supplementary

Course Bachelor of Medicine and Bachelor of Surgery

Class Third Prof. MBBS Part-I (10013)

Exam Name Bachelor of Medicine and Bachelor of Surgery (Third Prof. Part-I) (ANNUAL) EXAM. DEC. .

Proceed

Step 4: Enter Student Details:

- In the Student Name Please fill only the First two letters of your name Form Example if the Student's name is Krishna then "kr" should be inserted.
- In the second field type student's registration numbers i.e. in the format 22-XXX-01
- In ABC Id please type 12 digits ABC Id number.

Student Selection Panel

Student Name *

Name (First two letters of your name Eg: ra)

Student Registration No. *

Registration Number

Registration No. i.e. 22-XXX-01

ABC Id

Enter ABC Id

Continue

Step 5: Please enter only correct personal details in the first step and upload photographs and signature according to the given file sizes. After the details are entered correctly Click on the Save and Next Button. **The mobile number and working Email ID should be provided here otherwise**

there will be issue with the online Payment.

Bachelor of Medicine and Bachelor of Surgery (Third Prof. Part-I) (ANNUAL) EXAM. DEC.-2025

Step-1 / Step-2 / Step-3 / Step-4

Basic Detail of Candidate

Registration Number

1. Name of Applicant (आवेदक का नाम) *

2. Father's Name (पिता का नाम) *

3. Mother's Name (माता का नाम) *

4. Student's Category (श्रेणी) *

5. Category (जाति श्रेणी) *

6. Minority (अल्पसंख्यक) *

7. Gender (लिंग) *

8. Other Category (अन्य श्रेणी) *

9. Date of Birth (जन्म-तिथि) *

10. Are You already Enrolled with this University
(क्या आप इस यूनिवर्सिटी में पहले से नामांकित हैं?)

11. Attempt (अटेम्प्ट) *

12. College (महाविद्यालय)

13. Nationality (राष्ट्रियता)

Regular

GEN

NO

Male

NONE

01-06-2001

☒ YES ☐ NO

I

Adesh Medical College & Hospital (12001)Village Mohri, Shahbad (M) Kurukshetra, Haryana

INDIAN

Complete Address (पूरा पता)

Complete Address (पूरा पता)

14. Permanent Address (स्थायी पता) *

15. State (राज्य) *

16. District (ज़िला) *

17. Pin Code (पिनकोड) *

18. Mobile Number (मोबाइल नम्बर) *

19. Email Address *

20. Aadhar No.

21. ABC Id (Academic Bank of Credits)

Haryana

-- Select District --

335001

ABC Id

(सही मोबाइल नम्बर लिखें, आवश्यकता होने पर इसी नम्बर पर सम्पर्क किया जा सकता है।)

Please Upload Photo and Signature

Upload Your Recent Passport Photo *

Upload Your Recent Signature *

Choose file No file chosen

Choose file No file chosen

Image file must meet following criteria:
1. File Format : JPG/JPEG only
2. File Size : 50KB to 100KB

Image file must meet following criteria:
1. File Format : JPG/JPEG only
2. File Size : 20KB to 50KB

Save & Next

Step 6: Step-2 of Exam form shows the previous exam details and subject names. Click on the proceed button.

Bachelor of Medicine and Bachelor of Surgery (Third Prof. Part-I) (ANNUAL) EXAM. DEC.-2025

Step-1 / Step-2 / Step-3 / Step-4

Registration Number _____

1. Previous Examinations Details *

Sr. No.	Examination Name	Exam. Month	Exam. Year	Roll No	Obtained Marks	Result
1	Bachelor of Medicine and Bachelor of Surgery (1st Prof.) Jan.-2022	Jan.	22			
2	Bachelor of Medicine and Bachelor of Surgery (2nd Prof.) DEC-2022	Dec.	22			

2. Details of Subject(s) Offered *

Sr. No.		Subject	Type
1	☒	MB31 - Forensic Medicine and Toxicology	Compulsary
2	☒	MB32 - Otorhinolaryngology	Compulsary
3	☒	MB33 - Ophthalmology	Compulsary
4	☒	MB34 - Community Medicine	Compulsary

3. क्या आपके विरुद्ध कभी इस विश्वविद्यालय में UNFAIRMEANS का CASE बना है? : * NO ▼

Proceed

Step 7: At this step Preview of the details filled by the student is shown here. If there is any issue with the details, Please click on the Back button and edit the details otherwise click on the payment button.

Print Date: 21-11-2025 12:19:03

Preview

Pt. Bhagwat Dayal Sharma University of Health Sciences, Rohtak

Examination: Bachelor of Medicine and Bachelor of Surgery (Third Prof. Part-I) (ANNUAL) EXAM. DEC.-2025

Form No. 10000014

College

Aadhar No

Registration No.

ABC Id

Student's Name

Father's Name

Mother's Name

Category

Minority

Gender

Date of Birth

Attempt

Mobile No.

Address

Already Enrolled

Nationality

Roll No. Class & Year of last Exam appeared in This University

Signature of Candidate

Compilation of Marks (Last Examination Details)

For College Use	Sr. No.	Examination Name	Exam. Month	Exam. Year	Roll No	Obtained Marks	Result
Preview Form Exam Fee is pending.	1	Bachelor of Medicine and Bachelor of Surgery (1st Prof.) Jan.-2022	Jan.	22			
	2	Bachelor of Medicine and Bachelor of Surgery (2nd Prof.) DEC-2022	Dec.	22			

Details of Subject(s) Offered

S. No.	Code	Name
1	MB31	Forensic Medicine and Toxicology
2	MB32	Otorhinolaryngology
3	MB33	Ophthalmology
4	MB34	Community Medicine

UNFAIR-MEANS CASE IN LAST YEAR: NO

Exit
Payment

Step 8: Click on Proceed to Pay.

 Pt. Bhagwat Dayal Sharma University of Health Sciences, Rohtak Examination: Bachelor of Medicine and Bachelor of Surgery (Third Prof. Part-I) (ANNUAL) EXAM. DEC.-2025			
MAKE ONLINE PAYMENT			
Form Number:	10000014		
College Name:	Adesh Medical College & Hospital		
Name:		Father's Name:	
Email:		Mobile:	
Permanent Address:			
Fee Amount (INR):			
Proceed to Pay			
महत्वपूर्ण नोट : यदि ऑनलाईन भुगतान के पश्चात् किसी कारण से Examination/ Revaluation Form का प्रिंट नहीं होता है तो Home Page (Student Panel) पर जाकर दिए गए स्थान पर एनरोलमेंट वर्ष एवं नंबर अथवा Merchant ID डाल कर प्रिंट लिया जा सकता है।			

Step 9: After the payment is successful. A transaction ID will be received on the email for the successful transactions. Please take a print of the exam form. There will be two copies in the exam form. One student copy and another College Copy. Please submit the college copy in the college for the exam form verification process.

Exit

Print Exam Form

Print Date: 21-11-2025 12:37:12

Student Copy


Pt. Bhagwat Dayal Sharma University of Health Sciences, Rohtak

पंडित भगवत दयाल शर्मा स्वास्थ्य विज्ञान विश्वविद्यालय, रोहतक

 Examination: Bachelor of Medicine and Bachelor of Surgery (Third Prof. Part-I) (ANNUAL) EXAM.
DEC.-2025

College

Student's Name

Father's Name

Mother's Name

Category

Minority

Gender

Date of Birth

Aadhar No

Registration No.

Mobile No.

Email ID

Address

Nationality

ABC Id

Attempt

Roll No. Class & Year of last Exam appeared in This University

Signature of Candidate

Compilation of Marks (Last Examination Details)

For College Use	Sr. No.	Examination Name	Exam. Month	Exam. Year	Roll No	Obtained Marks	Result
Examination Fee Rs. 2500	1	Bachelor of Medicine and Bachelor of Surgery (1st Prof.) Jan.-2022	Jan.	22			
Transaction No. 11	2	Bachelor of Medicine and Bachelor of Surgery (2nd Prof.) DEC-2022	Dec.	22			
Transaction Date:							

Details of Subject(s) Offered

S. No.	Code	Name
1	MB31	Forensic Medicine and Toxicology
2	MB32	Otorhinolaryngology
3	MB33	Ophthalmology
4	MB34	Community Medicine

UNFAIR-MEANS CASE IN LAST YEAR: NO

Certified that all above entries are correct to the best of my knowledge and belief. I am not appearing in any other university examination and there is no UM case against me. I have deposited Examination fee through Online Mode.

Signature of Student

Please check that transaction number and form number should be same in all copies. If your form is correctly printed and fee is deposited in time, submit exam form in college. Fees once deposited will not be refunded.

I Certify that the candidate mentioned above has satisfied me by production of authentic documents, that the statements made by him/her above are correct, that he / she has fulfilled the conditions laid down under the regulations for eligibility to appear in the Examination mentioned above in force in the Pt.B.D. Sharma, University of Health Sciences, Rohtak and that he / she bears a good moral character.

Seal & Signature of Director/ Dean / Principal / Head of the College / Institution

Print Date: 21-11-2025 12:37:12

College Copy


Pt. Bhagwat Dayal Sharma University of Health Sciences, Rohtak

पंडित भगवत दयाल शर्मा स्वास्थ्य विज्ञान विश्वविद्यालय, रोहतक

Payment verification in case of Payment is not updated during the payment process.

Exam Form Filling Flow

Fill/Re-Print Form
(Annual/Supplementary/Rechecking)

→ START

Note: Re-Print can only be taken after successful payment of fee and before last date of Fees Submission.

Verify Payment / Printout
(प्रिंट नहीं आने की स्थिति में)

→ Annual/Supplementary

→ Rechecking

नोट: यदि ऑनलाईन भुगतान के पश्चात् किसी कारण से Examination/Revaluation Form का प्रिंट नहीं हुआ है तो एनरोलमेंट वर्ष एवं नंबर अथवा Merchant ID डाल कर प्रिंट लिया जा सकता है।

Check Online Payment Transaction Status

Printout of Exam Form with Merchant ID.

Merchant Transaction Identifier
(20 digits):
Example: d74a7666dfb821cc85bb

Merchant Transaction Identifier

Fetch Payment

Insert the transaction ID received to the provided Email ID and fetch the payment status. If the status is successful. Please click on the update Payment button otherwise retry the payment.