



MOUNTAIN WOMEN
ACADEMY FOR HEALTHCARE EXCELLENCE



+ 91-9653082993, 9415110046
0522-3657422, 3519842



19, R K Puram, Rail Vihar Tiraha,
(Vikalp Khand, Gomti Nagar)
Malhaur, Lucknow -226028
www.mwh.org.in, email: info@mwh.org.in

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APPLICATION FORM 2024-25

Application No : Registration No :

(office use only)

Online Receipt. No. / Transaction No. / D.D. No.	Date	Name of The Bank & Place / Payment Gateway	Amount

Course Applied (✓) : **DHM** **ADHM** **PGDHM** **PGDMLT** **PGDRIT** **PGDDT**
 PGDWA **PGDPA** **PGDND** **PGD MTHM** **CCPT** **CCET**

1. Name of Applicant

2. Date of Birth Day Month Year

3. Gender (✓) Male Female Nationality

4. Category (✓) GEN SC ST OBC Other (Specify).....

5. Father's Name

6. Mother's Name

7. Address

CITY DISTRICT

STATE PIN

8. Student's Mobile Father's Mobile

9. Email

10. Aadhar No. 11. Religion

Class	Board	Marks Obtained	Max Marks	Passing Month & Year	Roll No.	Overall %
10th						
12th						
12th Marks	PHY	CHEM	MATH	BIO	ENG	

Degree/ Certificate	College / University	Subjects Studied	Marks Obtained	Max Marks	Passing Month & Year	Overall %
B.Sc 3 rd Year						
B.Sc 2 nd Year						
B.Sc 1 st Year						
Others						

Details regarding NEET - 2024

NEET UG 2024 Roll No.

Total Marks obtained (out of 720)

NEET UG 2024 Application No.

Declaration

I hereby declare that the particulars given by me in this application are correct. If any of the particulars given or documents submitted by me are not correct or false, my provisional admission will stand automatically cancelled without any intimation notice or refer to me and I shall also be liable for any other punishment, penalty or legal action in such cases. I have clearly read and understood the fee structure and rules and regulations for the courses given in the course brochure.

I fully understand that "MW Academy for Healthcare Excellence" is an autonomous institute under the aegis of OACD- "Oxford Academy for Career Development", a society registered under the Societies Registration Act 21, 1860.

However, also understand that "MW Academy for Healthcare Excellence" is not affiliated to any University, University Grant Commission, NMC, INC or AICTE and this course is not recognized by any statutory body. The course completion certificate shall be issued by "MW Academy" and "OACD" on successful completion of all the requirements of the course and at sole discretion of "MWAHE" and "OACD".

Signature of
of Parent

Signature of
of The Student

Name.....

Name.....

Filled in application from with enclosures to be forwarded to:

The Principal / Office of Admissions

"Mountain Women Academy For Healthcare Excellence"

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