



All India Institute of Medical Sciences


Ansari Nagar, New Delhi - 110029

AIIMS Undergraduate Basic Registration Form

Candidate Profile

Registration ID: U5342992897

Basic Registration Date: 06/05/2025

Candidate Name: ADITI RAJ	Date of Birth: 07 Jul 2005	
Gender: Female	Category: OBC (NCL)	
Father's Name: KANHAIYA KUMAR	Mother's Name: SOMLATA DEVI	
PWBD Status: No	PWBD Category: NA	
Nationality: INDIAN	State of Domicile: BIHAR	

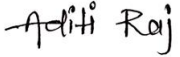
Contact Details

Address for Permanent: AT PO PS SANHOULA, DIST BHAGALPUR, STATE BIHAR, Sanhoula , Banka, BIHAR, India, 813205	Correspondence Address: AT PO PS SANHOULA, DIST BHAGALPUR, STATE BIHAR, Sanhoula , Banka, BIHAR, India, 813205
Mobile No: 1. 9279510649 , 2. Alternate-MobileNo 9279510649	E-Mail ID: aditiraj772005@gmail.com

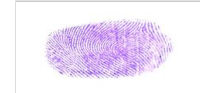
Valid Photo Identity (To be presented in original at the Examination Center along with Admit Card)

ID Proof: Aadhar Card	ID No: 393327785149	Place of Issue: India	Issue Date: NA	Valid Till: NA
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UNDERTAKING/DECLARATION: I hereby declare that the information furnished by me in the Registration/Application Form is correct and nothing has been concealed. In case any information furnished by me is found to be false/incorrect/untrue than i shall be liable to civil/criminal prosecution and my claim to admission/appointment/registration/ service in the Institute may be cancelled/terminated.



Signature of Candidate



Thumb of Candidate