

## **GEETANJALI UNIVERSITY, UDAIPUR**

## **Program Wise REVISED**Time Table

The below examination shall be conducted subject to prevailing Covid-19 condition and directives of the Rajasthan state government.

Scheme B.P.T. FIRST YEAR SUPPLEMENTARY EXAMINATION MARCH-2023

Institute GCP (GEETANJALI COLLEGE OF PHYSIOTHERAPY)

**Program** BACHELOR OF PHYSIOTHERAPY

Branch B.P.T.

| S.No | Date & Day             | Time               | Subject            |
|------|------------------------|--------------------|--------------------|
| 1    | 20-03-2023 (Monday)    | 10:30 AM - 1:30 PM | ANATOMY            |
| 2    | 22-03-2023 (Wednesday) | 10:30 AM - 1:30 PM | PHYSIOLOGY         |
| 3    | 24-03-2023 (Friday)    | 10:30 AM - 1:30 PM | BIOCHEMISTRY       |
| 4    | 27-03-2023 (Monday)    | 10:30 AM - 1:30 PM | EXERCISE THERAPY-I |
| 5    | 29-03-2023 (Wednesday) | 10:30 AM - 1:30 PM | ELECTRO THERAPY-I  |

## INSTRUCTIONS TO BE FOLLOWED STRICTLY BY THE CANDIDATES WHILE APPEARING IN THE EXAMINATIONS:

- 1. All the candidates will carry their own hand sanitizer in transparent bottle.
- 2. All the candidates will cover their nose & mouth with proper mask.
- 3. All the candidates will follow Physical distance norms as per the guidelines.
- 4. All candidates will follow the precautions to be taken by them to avoid spread of Covid-19.
- 5. All candidates will ensure that they are not sick. If, sick inform immediately to the centre superintendent.
- 6. All instructions issued while appearing in Examination Centres will be strictly adhered to by the candidates.
- 7. All candidates will follow all instructions given in Admit Card.

## Note: - \*EXAMINATION WILL BE CONDUCT AT GEETANJALI MEDICAL COLLEGE & HOSPITAL (GMCH)\*

- 1. Complaint against question papers, if any, may be forwarded to this office through the Center Superintendent within 7 days from the date of the paper concerned, after which no compliant will be entertained.
- 2. Examinees are required to be in touch regarding date and timing of their Practical Examination.

| Dated: | 9/2                       |
|--------|---------------------------|
| Dateu  | FOR EXAMINATION USE ONLY  |
|        | CONTROLLER OF EXAMINATION |
|        |                           |

**CONTROLLER OF EXAMINATION** 

CC: -

- 1. P.S to President
- 2. The Registrar