

(VII)

Application fee Rs. 750/-

NOTE: Read the prospectus carefully and fill the columns without fail. All the particulars are to be filled by the candidate in block letters in his/her own handwriting.

APPLICATION SERIAL NO: _____



SRI VENKATESWARA INSTITUTE OF MEDICAL SCIENCES

(A University established under the act of A.P State Legislature)

TIRUMALA TIRUPATI DEVASTHANAMS, TIRUPATI – 517 507

APPLICATION FOR ADMISSION INTO FELLOWSHIP / CERTIFICATE COURSES FOR MEDICAL GRADUATES (2019-20)

FOR OFFICE USE

Area: SVU Local / Non Local

Verified by : _____ Signature: _____

To be filled by the candidate

Application for admission into _____ course

1. Particulars of payment of application Fee :

D.D. No.	Name of the bank & Place	Date	Amount



2. Name of the applicant (in full) : (in capital letters)

Surname										Name									

3. Date of birth

4. Age (in years):

Date	Month	Year

5. Gender(✓): Male Female Transgender

6. Family Details :

	Name	Occupation & office address	Mobile No.
a) Father			
b) Mother			
c) Spouse (if married)			

7. a) Category (✓) in the appropriate box)

b) Caste:.....

OC	SC	ST	BC				
			A	B	C	D	E

8. Address:

Address for communication	Permanent Address
Mobile No:	Aadhar Number:
e-mail ID:	

9. Details of qualifying examination (MBBS / MD / MS/ DNB):

Qualification	Marks secured	Max. marks	%	No. of attempts	Name of the college, place	Speciality in PG	Month & year of passing
MBBS						NA	
MD/MS/DNB							

10. Medical Council Regn. No. :

i) MBBS .No:..... Date:....., Name of the council.....

ii) PG. No:....., Date:....., Name of the Council.....

11. Are you suffering from any chronic illness : Yes / No

If Yes, specify

12. i) Is any criminal case pending against you in the court of law. Yes / No

ii) Is any disciplinary enquiry is pending in the previous institution. Yes / No

DECLARATION

I do hereby certify that the particulars furnished in the application are true and correct to the best of my knowledge. I agree to abide by the rules and regulations of the institute. I also declare that in the event of any information furnished in the application and enclosures are found to be incorrect or false at a later date, my admission may be cancelled and appropriate legal action may be initiated by the institute.

I further declare that, I am not suffering from any illness, which makes me ineligible for admission. I further state that I am not involved in any criminal case / disciplinary action pending against me in the previous institution.

In the event of my admission to the course, I will abide the rules and regulations laid down by the institution during my study. I undertake that I will not indulge in any unlawful activities like ragging etc., and that I am also aware of the consequences involved therein. I am aware that I will be punished for the same as per the rules of the institute/Govt.

Signature of the father/spouse
Name:

Signature of the applicant
Name:

DECLARATION BY THE STUDENT

(Those who have not completed the PG degree (MD, MS, DNB) on the date of submission of application have to submit the following declaration)

I, Dr. _____ hereby declare that I am undergoing PG degree course in _____ (specialty) from _____ (college) _____ (place) and will be completing on _____. I will submit the provisional degree certificate on or before the date of counseling, failing which I will have no claim over admission.

Signature of the Candidate

CERTIFICATE

This is to certify that Dr. _____ is Pursuing PG degree in _____ subject at _____ college _____ place and will be completing the same on _____. The above certificate is issued to enable the candidate to appear for the interview for the fellowship programmes.

Place:
Date:

***Principal / Dean
with seal***

DOCUMENTS TO BE SUBMITTED ALONG WITH THE APPLICATION :

(Xerox copies)

- 1) MBBS & PG Degree provisional / original pass certificate.
- 2) Consolidated Marks memo for MBBS and PG degree
- 3) Internship certificate
- 4) Medical Council Registration certificate for MBBS and PG degree.
- 5) Study and conduct certificates.
- 6) S.S.C certificate or its equivalent as proof of date of birth
- 7) Certificate of Social status (ST/SC/BC category)
- 8) Residence certificate or any other suitable documentary proof (those who studied in an Unrecognized institution or studied outside AP / Telangana but resided within the state) Proforma is available in the prospectus.
- 9) Demand Draft (D.D) for **Rs. 750/-** drawn from a nationalized bank in favour of the Director, SVIMS, Tirupati payable at Tirupati.

Note: The filled in application along with enclosures shall be sent by post or in person so as to reach **The Registrar, Sri Venkateswara Institute of Medical Sciences, Alipiri Road, Tirupati - 517 507.**