

(V)

Application fee Rs. 750/- for OC, BC & Other categories : Rs. 500/- for SC/ST category

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 Post Basic Dip. in Nursing Courses (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

Passport size  
Photo to be self  
attested

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

Surname	Name

3. Date of birth

Date	Month	Year

4. Age (in years):

5. Sex(✓): Male  Female  Transgender

6. Family Details :

	Name	Occupation & office address	Annual income
a) Father			
b) Mother			
c) Guardian (if both parents are not alive)			
d) Spouse (if married)			

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

b) Caste: .....

OC	SC	ST	BC				
			A	B	C	D	E

c) Are you eligible for claiming reservation under any other category:.....  
If yes, mention and enclose the certificate as proof

8. Marital Status (✓): Single  Married

9. Whether you belong to TTD/SVIMS Employee Category (if yes, enclose proof): Yes / No:

10.

Address for communication	Permanent Address
Student Mobile No:	Parent Mobile No:

e-mail ID:

Student's Aadhar No:

11. Identification marks (as given in S.S.C. mark sheet) :

i)

ii)

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

If Yes, specify

13. 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

14. Details of qualifying examination :

a) Qualification .....b) Speciality: .....c) No. of attempts.....

d) Total marks secured : ..... out of ....., percentage ..... %

15. Details of study (enclose study certificate issued by the authorities of school/ college recognized by government of A.P. for the last seven years including qualifying examination)

Class	Academic Year	School/college, Place	District	Month & year of passing
9 <sup>th</sup> class				
10 <sup>th</sup> class				
Intermediate				
B.Sc (Nursing)				
Other Qualification				

## 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 activity, ragging and for any violation, in this regard. I am aware that I will be punished for the same as per the rules of the institute/Govt.

Signature of the father/guardian/spouse  
Name :

Signature of the applicant  
Name :

### DOCUMENTS (XEROX COPIES) TO BE SUBMITTED ALONG WITH THE APPLICATION:

- 1) B.Sc Nursing or Equivalent Degree / PG Diploma provisional / original pass certificate relating to qualifying examination.
- 2) Marks certificate for all the years of the qualifying examination
- 3) Transfer certificate.
- 4) Study and conduct certificates from 9<sup>th</sup> to degree from a school / college recognized by government.
- 5) S.S.C certificate or its equivalent as proof of date of birth
- 6) Integrated permanent community certificate (SC/ST/BC) issued by e-seva/ Mee-seva centres.
- 7) For TTD / SVIMS employees, service certificate from the controlling officer
- 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 **Institute's website**
- 9) Demand Draft (D.D) for **Rs. 750/-** for OC, BC category & **Rs. 500/-** for SC/ST category 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.**