

NOTE: Read the prospectus & Additional instructions carefully and fill all the columns without fail. All the particulars are to be filled in by the candidate in block letters in his/her own handwriting. Hall Tickets (Original & Duplicate) are to be printed and filled in on separate papers.



SRI VENKATESWARA INSTITUTE OF MEDICAL SCIENCES
 (A University established by an act of A.P State Legislature)
TIRUMALA TIRUPATI DEVASTHANAMS, TIRUPATI - 517 507

VI Application for M.Sc. (Nursing) Course (2024-25)

(For the candidate other than AP State (All India))

<u>FOR OFFICE USE</u>	
Verified by :	Application Serial No :
Signature :	Area : SVU Local / Non Local

To be filled in by the candidate

Application for admission into _____ course

1. Particulars of payment of application Fee :

Rs.5,900/- for OC, BC & Rs. 4,956/- for SC/ST category (Inclusive of GST)

D.D. No.	Name of the Bank & Place	Date	Amount (Rs.)

Fix Passport size
colour photo
with self
attestation

2. Name of the applicant (As per SSC) : (in capital letters)

Surname	Name

3. Date of birth

Date	Month	Year

4. Age (in years):

5. Gender (✓): Male Female Transgender

6. Family Details :

	Name	Occupation & Address
a) Father		
b) Mother		
c) Guardian (if parents are not alive)		
d) Spouse (if married)		

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

OC	SC	ST	BC				
			A	B	C	D	E

b) Caste:

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

15. Work experience (Teaching / Clinical) :
(furnish the details of experience and enclose proof)

DECLARATION

I do hereby certify that the particulars furnished in the application are true and correct to the best of my knowledge. 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 against me 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 by 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 (PHOTO COPIES) TO BE SUBMITTED ALONG WITH THE APPLICATION:

- 1) B.Sc.(N) degree certificate.
- 2) Marks certificate for all the years of the qualifying examination.
- 3) Transfer certificate.
- 4) Study and conduct certificates from 9th to degree from a school / college recognized by government.
- 5) S.S.C / 10th class certificate or its equivalent as proof of date of birth.
- 6) Integrated permanent community certificate for SC/ST/BC categories.
- 7) Latest EWS certificate.
- 8) Experience certificate.
- 9) For In-service candidates, furnish No objection certificate (NOC) obtained from their competent authority.
- 10) **Demand Draft (D.D)** for **Rs.5,900/-** for OC/BC category & **Rs.4,956/-** for SC/ST category drawn from nationalized bank in favour of **the Director-cum-VC, SVIMS, Tirupati** payable at Tirupati. The DD shall be taken on or after 15.07.2024 will only be accepted.

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** on or before the last / closing date notified. **The DD shall be taken in the name of the Director-cum-VC only and not the Registrar.**



**SRI VENKATESWARA INSTITUTE OF MEDICAL SCIENCES, TIRUPATI - 517 507
HALL TICKET FOR ENTRANCE TEST FOR M.Sc. NURSING COURSE (2024-25)**

(For office use)	
Hall ticket no.	Date :
Venue :	Time :

DUPLICATE

(To be filled in by the candidate in own hand writing).

Surname	Name
Full name of the candidate : (In block letters)	
<input style="width: 100%; height: 20px;" type="text"/>	
Father name :	<input style="width: 100%; height: 20px;" type="text"/>
Address :	<input style="width: 100%; height: 20px;" type="text"/>

Identification marks 1)
2)

Recent passport size
colour photo to be
pasted here

Signature of the candidate

Controller of Examinations

INSTRUCTIONS TO CANDIDATE

1. The candidate to present at the examination centre half an hour before the commencement of the examination.
2. The candidate has to show the Hall Ticket issued by this institute to the invigilator at the entrance of the test centre.
3. The candidate without Hall Ticket will not be allowed to appear for the entrance test.
4. No traveling expenses will be paid for attending the entrance test.
5. The candidate has to bring their own blue/ black ballpoint pen. No other material will be permitted.
6. Nobody is allowed to accompany the candidate into the test center premises.
7. No candidate will be allowed to enter into the examination hall after commencement of the examination. Nobody will be allowed to leave the examination hall till the last bell is given.
8. The entrance test pattern is 100 Multiple Choice Questions based on B.Sc. Nursing syllabus. The medium of entrance test is English only.
9. Violation of any instruction and malpractice in any form in the examination hall shall render the candidate liable for cancellation of his/her script and forfeit of his/her claim for appearing in the entrance test.
10. The Hall Ticket issued by this institute shall be preserved till the admission to the course is over and shown at the time of counseling to the course, if required.
11. Printed or written material and electronic gadgets like, calculators, cell phones, watches, earphones etc., are not allowed inside the examination hall. Holding this material in any form shall be treated as malpractice and liable for punishment as per SVIMS rules.
12. The candidate should not write his /her name, initials or address anywhere on the answer sheet (or) question paper.

* The Date, Time and Venue of the exam will be intimated through email / sms later.

Controller of Examinations