



SRI VENKATESWARA INSTITUTE OF MEDICAL SCIENCES

(A University established by an act of A.P State Legislature)

TIRUMALA TIRUPATI DEVASTHANAMS, TIRUPATI – 517 507

Application for Medical Physics Internship Programme (2025-26)

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

FOR OFFICE USE

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

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

4. Age (in years):

Date	Month	Year

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

b) Caste:

OC	SC	ST	BC				
			A	B	C	D	E

If SC please mention SC Group-I ☐ Group-II ☐ Group-III ☐

Please mention sub category if belong to BC/SC:

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

8. Marital Status (✓): Single ☐ Married ☐

9.

Address for communication	Permanent Address
Student Mobile No:	Parent Mobile No:
e-mail ID:	Student Aadhar No.

10. Identification marks (as given in S.S.C./ 10th class mark sheet) :

i)

ii)

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

If Yes, specify

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

iii) Is any disciplinary enquiry is pending in the previous Institution. Yes / No

12. Details of qualifying examination :

a) Qualification _____ b) Speciality: _____

c) No. of attempts _____ d) Total marks secured : _____ out of _____ , _____ %

13. 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	From-To	School/College, Place	District / State	Month & year of passing
Intermediate				
B.Sc. Degree Specialization				
M.Sc. Degree Specialization				

14. Are you in Govt. Service : (Yes / No)

(If yes, mention the place of work and forward the application through proper channel and enclose NOC obtained from the competent authority)

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. in Physics (Optional subject) and M.Sc. in Medical Physics (or) M.Sc. in Radiological Physics (or) M.Sc. in Physics with Diploma in Medical / Radiological physics 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 Inter (+2) to PG from a school / college recognized by government.
- 5) Intermediate (+2) certificate
- 6) S.S.C certificate or its equivalent as proof of date of birth.
- 7) Integrated permanent community certificate (SC/ST/BC)
- 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) The candidates should pay the prescribed application fee **Rs. 5,900/-** for OC/ BC category & **Rs.4,956/-** for SC/ST category drawn from a nationalized bank in favour of the **Director-cum-VC, 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** 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.**