

(I)

Application fee Rs. 750/- for OC, BC & 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 MPT/ M.Sc (NURSING) COURSES (2017-18)

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 attested
by Gazetted Officer
with seal

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

8. Marital Status (✓): Single / married

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

10.

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

e-mail ID:

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 (Refer clause 13(xii) of prospectus)

13. Details of qualifying examination :

a) Course of study : _____

b) No. of attempts : _____

c) Maximum Marks _____ Marks secured : _____ percentage _____ %

14. 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	Month & year of passing
9 th class				
10 th class				
Intermediate				
BPT/ B.Sc(N)				

15. Date of completion of Internship (for MPT Course only) :

(If not completed, furnish declaration duly signed by the applicant & Principal, if the internship is going to complete on or before 31.07.2017 (available in the website)

16. Experience(Teaching / Clinical) (for M.Sc.(N) only) :

(furnish the details of experience and enclose proof)

17. Are you in Government service : (Yes / No)

(If yes mention the place of work and forward the application through proper channel and enclose NOC certificate 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 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 mentioned in the prospectus, which makes me ineligible for admission.

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, 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 TO BE SUBMITTED ALONG WITH THE APPLICATION : (xerox copies attested by a Gazetted officer with official seal)

- 1) BPT, 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 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 children, service certificate from the controlling officer
- 8) Residence certificate or other documentary proof for Un-reserved category (those who studied in an unrecognized institution or studied outside AP / Telangana but resided within the state) as per the proforma available in the prospectus.
- 9) Declaration by MPT applicants if internship is not completed.
- 10) Experience certificate for M.Sc (N) applicants.
- 11) For in-service candidates, furnish No objection certificate (NOC) obtained from the Regional Director / Commissioner APVVP or as the case may be.
- 12) 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.**



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

(To be filled by the Office)

DUPLICATE

Hall ticket no.

Date :

Venue :

Time :

(To be filled-up by the candidate in his/her own hand writing).

Surname

Name

Full name of the candidate :
(In block letters)

--	--

Father's name :

--

Address :

Identification marks 1)

2)

Passport photo
to be signed
by the
Gazetted Officer
with
official seal

Signature of the candidate

Controller of examinations



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

(To be filled by the office)

ORIGINAL

Hall ticket no.

Date :

Venue :

Time :

(To be filled-up by the candidate in his/her own hand writing).

Surname

Name

Full name of the candidate :
(In block letters)

--	--

Father's Name :

--

Address :

Identification marks 1)

2)

Passport photo
to be signed
by the
Gazetted Officer
with
official seal

Signature of the candidate

Controller of examinations