

( IV )

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 M.Sc. Cardiovascular Tech. / Dialysis Tech. / Post Basic Dip. in 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



## **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) Degree 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.**