



9.

Address for communication	Permanent Address
Mobile No: (1)	(2)
e-mail ID: (1)	(2)

10. Details of qualifying examination (MBBS / MD / MS/ DNB):

Qualification	Marks secured	Maximum marks	No. of attempts	Name of the college, place	Speciality in PG	Month & year of passing
MBBS					NA	
MD/ MS/DNB						

11. Medical Council Regn. No's

- i) MBBS .....Date:....., Name of the Council.....  
 ii) PG .....Date:....., Name of the Council.....

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

### 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 against me.

I further declare that, I am not suffering from any illness, which makes me in eligible for admission. I further state that I am not involved in any criminal case/ disciplinary action pending against me in the previous institute.

In the event of my admission in to the course, I undertake that I will not indulge in any unlawful activities, ragging etc., and that I am also aware of the consequences involved therein. I am aware that I will be punished for the same as per the rules of the institute/Govt.

Signature of the Parent/spouse  
 Name :

Signature of the applicant  
 Name :

### DOCUMENTS TO BE SUBMITTED ALONG WITH THE APPLICATION : (Photo copies)

- 1) MBBS and / or PG Degree provisional / original certificate.
- 2) Consolidated Marks memo for MBBS and /or PG degree
- 3) Internship certificate
- 4) Medical Council Registration certificates for MBBS and / or PG degree.
- 5) Study and conduct certificates.
- 6) S.S.C certificate or its equivalent as proof of date of birth
- 7) Certificate of Social status (ST/SC/BC category)
- 8) Demand Draft (D.D) for **Rs.750/-** drawn from a nationalized bank in favour of the Director, SVIMS, Tirupati payable at Tirupati, towards application fee.

**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 17-11-2021.**