APPLICATION FORM FOR ALL INDIA ENTRANCE EXAMINATION – 2014
HIGHER SPECIALITY D.M. / M.Ch. DEGREE COURSES (UNFILLED SEATS)

NAME OF THE CANDIDATE (IN BLOCK LETTERS) : .................................................................

GROUP APPLIED FOR : .................................................................

NAME OF THE COURSE OPTED FOR : .................................................................

Details of Application & Examination fee

<table>
<thead>
<tr>
<th>DD No...............</th>
<th>Date...............</th>
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<tr>
<td>Amount Rs: 500/-</td>
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Bank Name: ..................................................
Branch: .....................................................
(Note: Please fill in each column in your own handwriting and put a tick mark (√) wherever necessary and strike off the portion not applicable. Incomplete application form will be rejected summarily).

1. a) Name of the Candidate : Dr. 
   (IN BLOCK LETTERS)
   b) Complete Address with State & Pin Code to which communication is to be sent
   c) Phone No. with STD Code : Residence :
   Mobile :
   d) E-mail :

2. a) Father’s / Husbands’ Name :
   b) Mother’s Name :

3. Sex : ☐ Male ☐ Female

4. a) Date of birth and age :
   b) Place of birth, District and State :

5. Nationality and Religion :

6. Community :
   ☐ SC ☐ ST ☐ OBC ☐ OTHERS

7. Qualifying examination passed : Name of PG Degree :………………
   (Photocopy of the Degree certificate and Statement of Marks of all examinations to be enclosed)
   University Regn. No. :………………
   Month :………………
   Year :………………

8. a) Name and address of the Medical College where qualified : UG :………………
   PG :………………
   b) Whether the College and Course is recognized by the Medical Council of India
   Recognized ☐ Not Recognized ☐

9. Name of the University which awarded the Degree
   a) MBBS :
   b) Postgraduate :
10. Marks Secured in MD/MS Degree Course:

<table>
<thead>
<tr>
<th>Course</th>
<th>Subject(s)</th>
<th>Marks Secured</th>
<th>Maximum Marks</th>
<th>Month &amp; Year of Passing</th>
<th>No. of attempts</th>
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</thead>
<tbody>
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<td>FINAL MD/MS</td>
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</table>

GRAND TOTAL | Percentage of Marks

11. a) Whether the candidate has passed all the examinations in the first attempt: Yes / No

b) If no, how many attempts were made to pass:

<table>
<thead>
<tr>
<th>PG Exam</th>
<th>No. of attempts</th>
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</thead>
<tbody>
<tr>
<td>I – Year</td>
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</tr>
<tr>
<td>Final Year</td>
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</tbody>
</table>

12. Details of Permanent Registration with the Medical Council incorporating PG qualification: State ………………………………………

Regn. No.…………… …Date …………

(Photocopy to be enclosed)

DECLARATION BY THE CANDIDATE

I declare that the information furnished by me herein are true and correct. In case any information furnished herein is found to be incorrect or any document is found to be forged, I agree to forego my claim for admission and abide by the decision of the University authorities.

Place:

Date:  

Signature of the Candidate
SRI RAMACHANDRA UNIVERSITY  
(Declared under Section 3 of the UGC Act, 1956)  
Accredited by NAAC with ‘A’ Grade  
PORUR, CHENNAI - 600 116

HALL TICKET FOR ALL INDIA ENTRANCE EXAMINATION - 2014  
HIGHER SPECIALITY D.M./M.Ch. DEGREE COURSES (UNFILLED SEATS)

Name and mailing address of the Candidate (IN BLOCK LETTERS):

Name : Dr.……………………………………………………………………
Address:……………………………………………………………………
………………………………………………………………………….
………………………………………………………………………….
State :…………………………… Pin code:  ____________

Mobile:………………….. Phone ……………………………
E-mail id:  ........................

(Signature of the Candidate)

| REGISTRATION NO. | : |  |
| EXAMINATION CENTRE |   | SRI RAMACHANDRA UNIVERSITY  
PORUR, CHENNAI – 600 116 |
| DATE | : | 28.09.2014 (SUNDAY) |
| TIME | : | 10.00 a.m. to 1.00 p.m. |

Signature of the  
Issuing Authority  
Signature of the Candidate  
(To be signed in the Examination Hall)

Important Note : Candidates are instructed to report at the Examination Hall at least half-an-hour before the scheduled time. Ballpoint pen will be provided in the Examination Hall.

(Turn over for instructions)
INSTRUCTIONS TO THE CANDIDATE

• HALL TICKET MUST BE PRODUCED AT THE TIME OF ENTRANCE EXAMINATION WITHOUT FAIL. NO CANDIDATE SHALL BE ALLOWED TO WRITE THE ENTRANCE EXAMINATION WITHOUT THE HALL TICKET.

• MERE ADMISSION TO THE ENTRANCE EXAMINATION DOES NOT CONFER ON THE CANDIDATE ANY RIGHT OF ADMISSION TO THE COURSE OF STUDY APPLIED FOR.

• Candidates will not be allowed to carry any textual material, printed or written, bits of papers or any prohibited materials such as pen, pencil, calculators, mobile phones, paging devices or any other object/device including Ballpoint pen that is likely to be of unfair assistance inside the examination hall.

• No candidate will be allowed to go outside the examination hall till completion of the first one hour duration.

• Ball point pen for shading in the OMR Answer Sheet will be provided in the Examination Hall. Hence Candidates need not bring pens to the examination hall.

• Candidates shall maintain perfect silence and attend to their papers only. Any conversation or gesticulation or disturbance in the examination hall will be deemed as misbehaviour. If any candidate is found to be misbehaving or using unfair means or resorting to impersonation, his/her candidature will be cancelled and he/she will be liable to be debarred from taking any Entrance Examination of the University.

• All candidates appearing for the All India Entrance Examination shall be required to sign an attendance register alongwith left hand thumb impression to authenticate their presence.

• The OMR answer sheet of the candidate should be handed over to the Hall Superintendent along with the question booklet. If any candidate fails to do so, his/her candidature shall be cancelled.
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State: ………………….. Pin code: [ ] [ ] [ ]
Mobile: ……………………………………. Phone …………………………….
E-mail id: ………………………………………………………………….

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