



Application No. _____

**ADMISSION TO PARA MEDICAL COURSES 2017-2018 SESSION
COMMON APPLICATION FORM FOR GOVERNMENT COLLEGES AND
GOVERNMENT SEATS IN SELF-FINANCE COLLEGES
SELECTION COMMITTEE, DIRECTORATE OF MEDICAL EDUCATION,
KILPAUK, CHENNAI -10.**

A.R. No.	_____
(To be assigned by Selection Committee)	

1. +2 Examination / Equivalent Register Number, Year & Month (2016 & After 2016 Students should enter Roll Number. Others Register Number)	REGISTER NUMBER										YEAR			MONTH	
	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____

2) Name in Block Letters (Initials at the end)	:	_____		
3) Name of the Parent / Guardian	:	_____		
4) Gender (Encircle a Code)	:	MALE	FEMALE	TRANSGENDER
		1	2	3

SPACE FOR PHOTOGRAPH WITH NAME & DATE (TO BE ATTESTED BY GRADE A/B OFFICERS OF CENTRAL / STATE GOVERNMENT)

5) Nationality (Encircle a Code)	:	INDIAN	OTHERS	6) Nationality (Encircle a Code)	TAMIL NADU	OTHERS
		1	2			1

7a) Details of Education (Encircle a Code)	:	Studied from 8 th std to 12 th std. in Tamil Nadu	Studied from 8 th std to 12 th std in Other State
		1	2

7b) If you have completed your plus 2/equivalent schooling in Tamil Nadu (Encircle a code) :							
Government	Govt. Aided	Corporation	Municipality	KVS	CBSC	Pvt. School	Others (Specify)
1	2	3	4	5	6	7	8

8) School(s) of study (Evidence to be produced from the schools studied) :

Sl. No.	STANDARD STUDIED	YEAR OF PASSING	NAME & ADDRESS OF SCHOOL	* DISTRICT WITH CODE	STATE
1	8 th Std				
2	9 th Std				
3	10 th Std				
4	11 ^h Std				
5	12 th Std / Equivalent				

* Refer Annexure for District Code

9)	DATE OF BIRTH	:	DATE	MONTH	YEAR
		_____	_____	_____	

10)	COMMUNITY (Encircle a Code)	:	OC	BC	BCM	MBC	SC	SCA	ST
			1	2	2A	3	4	4A	5

11)	NAME OF THE CASTE	:	
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12)	CASTE CODE	:	
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13)	Qualifying Examination (Encircle a Code)	:	HSE	SSCE / CBSE	ISCE	OTHERS
			1	2	3	4

13a)	No. of Attempts	:	1 st Attempt	2 nd Attempt	3 rd Attempt
	REG. NO.	:			
	YEAR	:			

14)	RELIGION NAME	:	
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RELIGION CODE

15) Marks obtained in Science subjects in the Qualifying Examination in the First Attempt only :					
SUBJECT	MAXIMUM MARKS	MARKS OBTAINED	PERCENTAGE OF MARKS	WEIGHTED TOTAL MARKS	METHOD OF CALCULATION
PHYSICS			Y1 =	Y =	$\frac{Y1 + Y2}{2}$
CHEMISTRY			Y2 =		
BIOLOGY			X =	X =	X
BOTANY			Z1 =	Z =	$\frac{Z1 + Z2}{2}$
ZOOLOGY			Z2 =		
MATHEMATICS			W =	W =	W
TOTAL MARKS					(X+Y) OR (Z+Y) OR (W+Y)

15a) Fourth Optional Subject : (Except Language & English subject)	SUBJECT	MAXIMUM MARKS	MARKS OBTAINED

15 b) Marks obtained in English :	SUBJECT	MAXIMUM MARKS	MARKS OBTAINED
	ENGLISH		

16 a) Whether you come under the following special category ? If Yes, fill the column

Sl. No.	SPECIAL CATEGORY	CODE NO.	WRITE YES OR NO	WHETHER EVIDENCE PROCUCED OR NOT
1)	Ex-SERVICEMEN	01		
2)	ORTHOPEAEDICALLY PHYSICALLY DISABLED	02		

17a)	Are you a FIRST GRADUATE in your family ? (Tick in appropriate Box) (If yes, Annexure XIV a & b to be enclosed)	YES	NO

17 b.	Has your brother / sister availed first graduate fee concession for studying professional courses (Tick in appropriate Box)	YES	NO

18)	Medium of Instruction : (Encircle a code)	ENGLISH	TAMIL	OTHERS
		1	2	3

19)	Mother Tongue		CODE	
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20) Occupation of Parent / Guardian (Encircle a code) :

STATE GOVT	CENTRAL GOVT.	PROFESSIONAL	INDUSTRY	BUSINESS	AGRI-CULTURE	PRIVATE ORGANISATION	SMALL TRADE	OTHERS
1	2	3	4	5	6	7	8	9

21) Average monthly income of Parent / Guardian : (Encircle a code) :

< Rs. 5000	Rs.5001 - 10000	Rs.10001 - 20000	Rs. 20001 30000	Rs. 30001 40000	Rs.40001 50000	> Rs.50001
1	2	3	4	5	6	7

22) Civic Status of your Native place (Encircle a code) :

CORPORATION	MUNICIPALITY	TOWNSHIP	TOWN PANCHAYAT	VILLAGE PANCHAYAT	OTHERS
1	2	3	4	5	6

23) NATIVE DISTRICT (as given in the Prospectus) :	NATIVE DISTRICT	DISTRICT CODE IN WHICH XII / EQUIVALENT STUDIED (As entered in column 8 under Sl.No. 5)

24) ADDRESS FOR COMMUNICATION :-

.....

 PINCODE
 MOBILE
 LAND LINE NO.
 E-MAIL ID :

Signature of the Parent / Guardian

Signature of the Candidate

Place :

Date :

DECLARATION BY THE APPLICANT & PARENT

I (Name in Full and in Block Letters) Son / Daughter/ Ward of an applicant for Para Medical Courses 2017-2018 session hereby solemnly declare that I have not claimed any dual Nativity in this regard and I belong to (Community) and the Subcaste I also declare that the information and the statements given in the application, OMR Sheet and enclosures are true, correct and complete. I further declare that if it is found otherwise, I will be liable to forfeit the seat and / or be removed from the rolls of the Institution at whatever stage of study, I may be, besides making me liable for criminal prosecution.

I further declare that I have not claimed the marks obtained in HSC / equivalent examination under improvement scheme for seeking admission to Para Medical Courses 2017-2018 session.

I HAVE ENCLOSED ALL THE COPY OF THE CERTIFICATES WITH THIS APPLICATION AND I HAVE READ THE PROSPECTUS AND I UNDERSTOOD ALL THE CLASSES MENTIONED IN THE PROSPECTUS.

இந்த விண்ணப்பத்துடன் என்னுடைய அனைத்து சான்றிதழ்களின் நகல்களையும் இணைத்துள்ளேன் என்று தெரிவித்துக் கொள்கிறேன். மேலும் 2017-2018 ஆண்டின் **PARAMEDICAL COURSES** படிப்பின் தகவல் தொகுப்பேட்டை முற்றிலும் கவனத்துடன் படித்து புரிந்து கொண்டேன் என்று உறுதியளிக்கிறேன்.

Signature of the Candidate

I (Name in Full & in Block Letters) Father / Mother / Guardian of an applicant for Paramedical Courses 2017-2018 session hereby solemnly declare that I am fully aware of the above declaration & the particulars furnished are correct. I declare that if it is found otherwise, my ward will be liable to forfeit the seat and also be liable for criminal prosecution.

Signature of the Parent / Guardian

Place :

Date :



A.R. No.

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(For Office use only)

PARA MEDICAL COURSES 2017-2018 SESSION SPECIAL CATEGORY FORM

Code No.	Category of Special Reservation
01	SON & DAUGHTER OF EX-SERVICEMEN
02	ORTHOPAEDICALLY PHYSICALLY DISABLED

1. Application No.
(As printed in the Prospectus)

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2. Name of the Candidate with
Address

.....
.....
.....
.....
.....

PIN

Telephone No. : Mobile No.

3. Special Category applied for (Tick the relevant Box)

Son / Daughter of	
Code 01	Code 2
Ex-Servicemen	Orthopaedically Physically Disabled

4. Details of DD enclosed

D.D. No.	Date	Amount	Details of Bank

5. Special Category Certificates enclosed :

YES	NO
1	2

Signature of the Candidate

(For Instructions see overleaf)

Instructions

1. The special Category form is to be sent along with the application in the same cover.
2. Put in the relevant box in the outer cover.
3. Candidate should enclose a DD for ₹ 100/- drawn in favour of the Secretary, Selection Committee, Kilpauk payable at Chennai. The Name of the Candidate, Application No. & Address should be written on the reverse of the Demand Draft.
4. Candidates should enclose an additional self addressed envelope(s) (24x12 cms) to send the special reservation counselling call letter(s).
5. Candidates should enclose relevant certificates obtained from the Competent Authority.
6. Application without a DD for ₹ 100/- and without the relevant certificates will be summarily rejected without intimation to the candidate.

Table showing the Code No. and the Special Category

Code No.	Category
01	SON & DAUGHTER OF EX-SERVICEMEN
02	ORTHOPAEDICALLY PHYSICALLY DISABLED

ADMISSION TO PARAMEDICAL COURSES 2017-2018 SESSION

SCRUTINY FORM

1 Details of Qualifying Exam

Registration/ Roll No.																			
---------------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Passing Month			Passing Year							
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INSTRUCTIONS TO FILL UP SCRUTINY FORM	
To be filled by the candidates as per the entries made in the Application form and returned	
1	Use only Blue color Ball point Pen for ticking and working.
2	Put only Blue color Ball Point Pen for ticking and writing
3	Write inside the white box, wherever writing is required

Paste here firmly your recent Photography 4cm x 5cm which name & date

2 NAME

3 ADDRESS

Mobile No.																			
	PINCODE:																		

4 Name of the parent / guardian

5 Sex 1.M 2.F 3.TG 6 Nationality 1. Indian 2. Others 7 Nativity 1.TN 2. Others

8 Details of Education 1 2 8b. Have completed your +2/ equalent schooling in TN, if yes 1 2 3 4 5 6 7 8

9 Date of Birth / /

10 Community 1.OC 2.BC 2A.BCM 3.MBC
 4.SC 4A.SCA 5.ST

11 Name of the Caste:

12 Caste Code

13 Qualifying Examination 1.HSC 2.SSCE/CBSE 3.ISCE 4.Others

13.a Passed all the subjects of Qualifying Examination & No.of Attempts

14 Religion

15.Marks in subjects (As entered in Application Form)

Fourth Option Subject

Subject	Physics	Chemistry	Biology	Botany	Zoology	Maths	English	Subject	Marks
Maximum Marks									
Marks Obtained									

16a. Special Category Yes No

17a.First Graduate in Family Yes No

18.Medium of Instruction 1.English 2. Tamil 3.Others

16B. If Yes?
 1. Children of Ex-Servicemen
 2. Physically Disabled

17b. Has your brother/ sister availed first graduate fee concession for studying professional courses Yes No

19.Mother Tongue

20. Occupation of the Parent

21. Monthly income of Parent/ Gaurdian

Civic Status 22 Native Place 23. School Place

24. District Code Native District School District

I sincerely affirm that the information furnished above are true

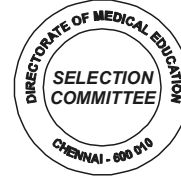
Station:
Date:

Signature of the Candidate within the box

REGD. POST / SPEED POST / COURIER SERVICE

மடிக்காதீர்கள்

DO NOT FOLD



Application No.

**APPLICATION FORM FOR ADMISSION TO PARAMEDICAL DEGREE COURSES IN
GOVERNMENT COLLEGES & GOVERNMENT QUOTA SEATS IN SELF-FINANCING COLLEGES
IN TAMIL NADU 2017-2018 SESSION**

+2 Examination / Equivalent Register Number, Year & Month (2016 & After 2016 Students enter Roll Number, Others Register Number)	REGISTER NUMBER										YEAR				MONTH	

IF SPECIAL CATEGORY :

COMMUNITY (ENCIRCLE A CODE)						
OC	BC	BCM	MBC	SC	SCA	ST
1	2	3	4	5	6	7

Sl. No.	SPECIAL CATEGORY	CODE NO.	WRITE YES OR NO
1)	EX-SERVICEMEN	01	
2)	ORTHOPAEDICALLY PHYSICALLY DISABLED	02	

From : (Candidate's Mailing Address)

.....
.....
.....
.....
.....

PINCODE

To

The Secretary
Selection Committee
No. 162, Periyar E.V.R. High Road
Kilpauk, Chennai - 600 010

Note: Note: Candidates seeking admission under Special Categories have to submit the Special Category Form along with the General Category Application in the same cover. Otherwise they will not be considered under Special Category.

குறிப்பு: சிறப்பு பிரிவின் கீழ் விண்ணப்பிக்கும் மாணவர்கள் அதற்கென குறிப்பிடப்பட்டுள்ள சிறப்புப் படிவங்களை பூர்த்தி செய்து, பொதுப்பிரிவு விண்ணப்பப் படிவத்துடன் ஒரே உறையில் சமர்ப்பிக்கவும். அவ்வாறு அனுப்பப்படவில்லையெனில் அவர் சிறப்புப் பிரிவிற்கு பரிசீலிக்கப்படமாட்டார்.