



**Application for
MD/MS Program
Year 2019-20**

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K S HEGDE MEDICAL ACADEMY
(A constituent unit of NITTE Deemed-to-be University)

- SPECIALITY: ORTHOPAEDICS OPHTHALMOLOGY ENT PEDIATRICS
 ANAESTHESIOLOGY GENERAL MEDICINE O B G RADIOLOGY
 GENERAL SURGERY PATHOLOGY DERMATOLOGY BIO CHEMISTRY
 MICROBIOLOGY PHARMACOLOGY COMMUNITY MEDICINE
 ANATOMY PHYSIOLOGY PSYCHIATRY FORENSIC MEDICINE

Please complete all sections of the form. Read the guidance notes before completing the form

NEET Roll No: _____ NEET Percentile: _____

NEET Score: _____ All India NEET-PG 2019 Rank : _____

KEA State Rank 2019: _____

Category: GM (Pvt) Govt. Seat NRI

A. PERSONAL DATA

Name:

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--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Gender (M/F/TG)

Date of birth(dd/mm/yy)

Mother Tongue

Nationality

Country of Permanent Residence

State of Domicile

Do you belong to
SC/ST/OBC/Category1 (specify)

Any other caste (specify)

Religion

Father's name

Occupation

Annual income

Mother's name

Occupation

Annual income

B. CONTACT DETAILS:

Current address for correspondence

Permanent address

Pin _____ Country _____

Pin _____ Country _____

Telephone (with code)

Telephone (with code)

Father's Mobile Number

Mother's Mobile Number

Student's Mobile Number

Local Guardian's Mobile Number

Father's / Mother's Email ID

Student's Email ID

PAN Number: **(To be filled compulsorily)**

(Father's)

(Mother's)

Aadhaar Card Number of the student: _____

Place of residence - Urban / Rural : _____

Hostel Required:

Yes

No

C. ACADEMIC QUALIFICATION

Exam Passed	College	University	Year of Passing	Marks		Class
				Maximum	Obtained	
I MBBS						
II MBBS						
III MBBS						
IV MBBS						

Total Marks:

Aggregate % :

D. Date of completion of Internship:

E. MCI / Karnataka State Medical Council Registration number and date :

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F. DECLARATION BY THE STUDENT

I have carefully read the details regarding admission to the MD/MS course. I declare that the information provided by me in this application is true and correct to the best of my knowledge. Should it be found that the information furnished is untrue in material particulars, I know that I am liable for criminal prosecution and will forego the allotted seat. In all matters regarding my admission to the course, the decision of the College is final and binding. I am also aware that the college will not refund the fees either in full or in part, under any circumstance. If I intend to discontinue the course at any time after joining, I hereby undertake to pay the college fees and dues as applicable for the remaining years of the course. I agree to abide by the rules and regulations of the College that may be framed from time to time. I am aware that any dispute arising out of the admission to the course will be subject to the jurisdiction of the courts of the city of Mangalore or the Honorable High Court of Karnataka.

Place _____

Date _____

Signature of the Applicant

G. Declaration by the Parent/ Guardian

(to be signed by the Guardian only if both parents of the applicant are not alive)

I _____ hereby affirm that the information provided and enclosures submitted thereto in this application of my son/ daughter/ward _____ for admission to the MD/MS course is true and correct to the best of my knowledge. Should it be found that the information furnished is untrue in material particulars, I know that I am liable for criminal prosecution and he/she will forego the allotted seat. I am aware that in all matters regarding his/her admission to the course, the decision of the College is final and binding. I am also aware that the College will not refund the fee either in full or in part, under any circumstance. If my ward decides to discontinue the course at any time after joining, I hereby undertake to pay the college fees and dues for the balance duration of the course. I am aware that any dispute arising out of the admission to the course will be subject to the jurisdiction of the courts of the city of Mangalore or the Honorable High Court of Karnataka.

Place _____

Date _____

Signature of the Parent/Guardian
(If guardian, mention relationship)

GUIDANCE NOTES

- You should ensure that you have filled in all the required information.
- ***Please ensure that you have submitted the originals and attested copies of the documents as specified in our website: www.nitte.edu.in***