

**ADMISSION TO MBBS / BDS COURSE 2013-2014 SESSION
COMMON APPLICATION FORM
SELECTION COMMITTEE, DIRECTORATE OF MEDICAL EDUCATION**

RANDOM NUMBER :

AR No

(To be assigned by the Selection Committee)

1. +2 Examination/ Equivalent
Register Number Year and Month

REGISTER NUMBER									

YEAR		

MONTH	

2. Name in Block Letters (Initial at the end) :

.....

3. Address for Communication :

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

PIN CODE

Land line Phone No :

Mobile No.

4. Name of Parent / Guardian :

.....

5. Sex : (Encircle a code)

MALE	FEMALE
1	2

6. Nationality : (Encircle a code)

INDIAN	OTHERS
1	2

7. Nativity :
(Encircle a code)

TN	Others
1	2

7 a. Details of Education: (Encircle the code which is applicable)

Studied from VIII Std to + 2 in Tamil Nadu	Studied from VIII Std to + 2 in Other State
1	2

7 b. If you have completed your plus 2/ equivalent schooling in Tamil Nadu encircle a code:

Government	Govt.Aided	Corporation	Municipality	KVS	CBSE	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):

STANDARD STUDIED	NAME & ADDRESS OF SCHOOL WITH PLACE, NAME OF STATE & PINCODE
VIII STD	
IX STD	
X STD	
XI & XII STD/EQUIVALENT	

9. Date of Birth :

DATE		MONTH		YEAR	

10. Community (Encircle a code)

OC	BC	BCM	MBC/DC	SC	SCA	ST
1	2	2A	3	4	4A	5

11. Caste Code :

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Refer List of Communities (For "OC" use code 500)

12. Name of the Caste :

13. Qualifying Examination : (Encircle a code)

HSE	SSCE/CBSE	ISCE	OTHERS
1	2	3	4

13 a. Particulars of passing the Qualifying

DETAILS	1 st Attempt	2 nd Attempt	3 rd Attempt
REG NO			
MONTH & YEAR			

14. Religion :
with code

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15. Marks obtained in select 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			Y 1	Y	$Y = \frac{Y1 + Y2}{2}$
CHEMISTRY			Y 2		
BIOLOGY			X	X	X
BOTANY			Z 1	Z	$Z = \frac{Z1 + Z2}{2}$
ZOOLOGY			Z 2		
TOTAL MARKS					(X+Y) or (Z + Y)

15.a Marks obtained in the Fourth Optional Subject:

SUBJECT	MAXIMUM MARKS	MARKS OBTAINED

16. Are you undergoing or completed a Professional Course in Tamil Nadu ? If Yes furnish particulars. If No write not Applicable (NA) :

NAME OF COURSE	MONTH, YEAR		NAME & PLACE OF COLLEGE
	FROM	TO	

17.a.If claiming for Special Categories, have you applied in the Form prescribed for Special Category (Please Tick)

YES	NO

b. If Yes specify the Special Category with code numbers
(Maximum of three special categories only permissible)

S.No	Code No	Special Category
I		
II		
III		

18 a. Educational status of the family (if admitted will you be the First Graduate in the Family ?) (Refer Annexure XIV a & b)
(Please Tick)

YES	NO

b. Has your brother/ sister availed first graduate fee concession for studying professional courses
(Please Tick)

YES	NO

19. Medium of Instruction : (Encircle a code)

ENGLISH	TAMIL	OTHERS
1	2	3

20. Mother Tongue : with code

21. 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

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

< ₹ 3000	₹ 3001-5000	₹ 5001-8000	₹ 8001-12000	₹ 12001-17000	₹ 17001- 21000	> ₹ 21000
1	2	3	4	5	6	7

23. Civic status of your Native place (Encircle a code):

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

24. Civic status of your School place (Encircle a code):

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

25. District Code (as given in the Prospectus):

NATIVE DISTRICT	DISTRICT IN WHICH STUDIED SCHOOL

Signature of Parent / Guardian
Date :

Signature of Candidate
Date :

DECLARATION BY THE APPLICANT & PARENT

I(Name in Full & in Block Letters) Son/ Daughter / Ward of an applicant for MBBS/ BDS course 2013-2014 session hereby solemnly declare that I have not claimed Dual Nativity in this regard and I belong to(Community) and subcasteI also declare that the information and the statements given in the application, OMR sheet and enclosures are true, correct & 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 MBBS/ BDS course 2013-2014 session.

I(Name in Full & in Block Letters) Father/ Mother / Guardian of an applicant for MBBS/ BDS course 2013-2014 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

Signature of the Candidate

SCRUTINY FORM

1. Details of Qualifying Exam

Registration Number	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Passing Month	<input type="text"/>	<input type="text"/>	Passing Year	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

INSTRUCTIONS TO FILL UP SCRUTINY FORM

- To be filled by the candidates as per the entries made in the application form and returned
- Use only Blue color Ball Point Pen for ticking and writing
- Put Tick mark(✓) in the correct Gray color boxes
- Write inside the white box, wherever writing is required

2. NAME

3. ADDRESS

Pincode :

Mobile :

Paste here firmly your recent Photography
4cm x 5cm

5. Sex	<input type="checkbox"/> 1. M	<input type="checkbox"/> 2. F	6. Nationality	<input type="checkbox"/> 1. Indian	<input type="checkbox"/> 2. Others	7. Nativity	<input type="checkbox"/> 1. TN	<input type="checkbox"/> 2. Others
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7a. Details of Education	<input type="checkbox"/> 1	<input type="checkbox"/> 2	7b. Have completed your +2/ equivalent schooling in TN, if Yes	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8
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9. Date of Birth	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	11. Caste Code	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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10. Community	<input type="checkbox"/> 1. OC	<input type="checkbox"/> 2. BC	<input type="checkbox"/> 2A. BCM	<input type="checkbox"/> MBC	13a. Passed all the Subjects of the Qualifying Examination in Attempts No.	<input type="text"/>	<input type="text"/>
	<input type="checkbox"/> 4. SC	<input type="checkbox"/> 4A. SCA	<input type="checkbox"/> 5. ST				

13. Qualifying Examination	<input type="checkbox"/> 1. HSC	<input type="checkbox"/> 2. SSCE/ CBSE	<input type="checkbox"/> 3. ISCE	<input type="checkbox"/> 4. OTHERS	14. Religion	<input type="text"/>
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15. Marks in Subjects (As Entered in Application Form)						Fourth Optional Subject	
Subject	Physics	Chemistry	Biology	Botony	Zoology	Subject	Marks
Maximum Marks	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Marks Obtained	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

16. Undergoing /Completed any professional course	<input type="checkbox"/> 1. Yes	<input type="checkbox"/> 2. No	17. Special Category	<input type="checkbox"/> 1. Yes	<input type="checkbox"/> 2. No	18a. First Graduate in Family	<input type="checkbox"/> 1. Yes	<input type="checkbox"/> 2. No	
If Yes?			If Yes?			18b. My Brother/Sister availed First Graduate fee Concession for Studying Professional Courses			
1. MBBS	5. B.SC AGRICULTURE		1. Children of Freedom Fighter			1. Yes 2. No			
2. BDS	6. VETERINARY		2. Children of Ex- Servicemen						
3. BE/B.TECH	7. PARAMEDICAL		3. Eminent Sports Person						
4. D.I.E.T.	8. OTHERS		4. Orthopaedically Physically Disabled						
						19. Medium of Instruction	<input type="checkbox"/> 1. English	<input type="checkbox"/> 2. Tamil	<input type="checkbox"/> 3. Others

20. Mother Tongue

21. Occupation of the parent	<input type="text"/>	22. Monthly Income of Parent/ Gaurdian	<input type="text"/>	Civic Status	<input type="text"/>	23. Native Place	<input type="text"/>	24. School Place	<input type="text"/>	25. District Code	<input type="text"/>	Native District	<input type="text"/>	School District	<input type="text"/>
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I sincerely affirm that the information furnished above are true.

Station :

Place :

Signature of the Candidate with in the box

**M.B.B.S. / BDS 2013-14 SESSION
SPECIAL CATEGORY FORM I**

Code No.	Category of Special Reservation
01	CHILDREN OF FREEDOM FIGHTERS
02	SONS & DAUGHTERS OF EX-SERVICEMEN
04	ORTHOPEDICALLY PHYSICALLY DISABLED

1. Application No
(As printed in the Prospectus)

2. Name of the Candidate with
Address
.....
.....
.....

PIN

Telephone No : Mobile No.

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

Son / Daughter of		Orthopedically Physically Disabled Code 04
Code 01 Freedom Fighter	Code 02 Ex Servicemen	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. Details of DD enclosed

DD No.	Date	Amount	Details of Bank
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

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 DD.
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 Item No., Code No., Category of the Special Category and number of seats

Code No.	Category	Number of Seats
01	Son / Daughter of Ex-servicemen*	3
02	Son / Daughter of Freedom Fighters**	3
04	Orthopedically Physically Disabled***	3% of the Total Seats

* G.O. (st) No. 145 HE (J1) Dept. dt. 16.05.2008

** G.O. (Ms) No. 198 HE (J1) Dept. Dt. 30.05.2003

*** 3% of total seats under Single Window System

SELECTION
COMMITTEE
APPLICATION



A.R. No.
(For Office use only)

**M.B.B.S. 2013-14 SESSION
SPECIAL CATEGORY FORM II
FOR EMINENT SPORTS PERSONS**

Code No.	Category of Special Reservation
03	Eminent Sports Persons

1. Application No
(As printed in the Prospectus)

2. Name of the Candidate with
Address
.....
.....
.....

PIN

Telephone No : Mobile No.
with STD Code

3. Details of DD enclosed

DD No.	Date	Amount	Details of Bank

5. Sports Certificates enclosed

Yes	No
1	2

Signature of the Candidate

(For Instructions see overleaf)

Instructions

1. The Special Category form of Sports Quota along with the application should be submitted in person to the Secretary, Selection Committee, Kilpauk, Chennai - 600 010 with relevant certificates as per Annexure - III b. The selection process guidelines are contained in Annexure III a.
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, Application No. & Address should be written on the reverse of the DD.
4. Candidates should enclose an additional self addressed envelope(s) (24x12 cms) to send the special category counselling call letter.
5. Application without a DD for ₹ 100/- and without the relevant certificates will be summarily rejected without intimation to the candidate.

Table showing the Special Category Code No.
Name and Number of seats

Code No.	Category	Number of Seats
03	Eminent Sportsperson*	3

* G.O. (st) No. 145 HE (J1) Dept. dt. 16.05.2008

REGD. POST / SPEED POST / COURIER SERVICE

மடிக்காதீர்கள்

DO NOT FOLD



APPLICATION FORM FOR ADMISSION TO
M.B.B.S. / B.D.S. COURSE IN

GOVERNMENT / SELF FINANCING COLLEGES IN TAMILNADU 2013 - 2014 SESSION

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+2 EXAM REGISTRATION NUMBER

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YEAR OF PASSING +2 EXAM

COMMUNITY
(ENCIRCLE A CODE)

OC	BC	BCM	M.B.C/D.C	SC	SCA	ST
1	2	2A	3	4	4A	5

SPECIAL CATEGORY
(MENTION CODE NO)

YES	NO
-----	----

(Put ✓)

Form No.	I		II	
Code No.	1	2	4	3

Application No.

(Tick (✓) the applicable code)

From : (Candidate's Mailing Address)

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

PINCODE

To

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

Note : 1. 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 : 1. சிறப்பு பிரிவின் கீழ் விண்ணப்பிக்கும் மாணவர்கள் அதற்கென குறிப்பிடப்பட்டுள்ள சிறப்புப் படிவங்களை பூர்த்தி செய்து, பொதுப்பிரிவு விண்ணப்பப் படிவத்துடன் ஒரே உறையில் சமர்ப்பிக்கவும். அவ்வாறு அனுப்பப்படவில்லையெனில் அவர் சிறப்பு பிரிவிற்கு பரிசீலிக்கப்படமாட்டார்.