

AMALA INSTITUTE OF MEDICAL SCIENCES

Amala Nagar P.O, Thrissur – 680555 Ph.No. 0487 - 2304116

ADMISSION TO MBBS COURSE FOR NRI CATEGORY SEATS 2016-17

*Affix a recent
passport size
photograph of
the applicant*

Application No. AMC

| | | | | | | | | |
|----|---|---|-------|------|-----------------------|----------------|------------|--------------------|
| 1 | Name of the Applicant (as in SSLC Certificate) | | | | | | | |
| 2 | Age & Date of Birth (in Christian Era) | Age | | Date | Month | Year | | |
| | | | | | | | | |
| 3 | Gender | <input type="checkbox"/> Male <input type="checkbox"/> Female | | | | | | |
| 4 | Religion / Other categories (if belonging to Syro-Malabar church letter from the parish priest to be attached) Tick <input checked="" type="checkbox"/> all applicable columns | <input type="checkbox"/> Hindu <input type="checkbox"/> Christian <input type="checkbox"/> Muslim <input type="checkbox"/> Syro-Malabar Church <input type="checkbox"/> Children of Amala staff | | | | | | |
| 5 | Whether eligible for the relaxation of marks in NEET-2016, if yes the category for the same. | <input type="checkbox"/> SC <input type="checkbox"/> ST <input type="checkbox"/> OBC <input type="checkbox"/> Locomotory disability of lower limbs | | | | | | |
| 6 | Name of the Parent/ Guardian (with relationship) If availing category (iii), supportive documents thereof | | | | | | | |
| 7 | Postal Address (with Pin Code) | | | | | | | |
| 8 | Telephone Number (with STD Code) | | | | | | | |
| 9 | Mobile Number of Parent/ Guardian | | | | | | | |
| 10 | E-mail Address (Active E-mail ID) | | | | | | | |
| 11 | Details of Courses (SSLC, Plus Two, Others) | | | | | | | |
| | Std | Name of the Institution Attended | Board | Year | Reg.No. of Final Exam | Marks obtained | Max. Marks | No. of appearances |
| | X | | | | | | | |
| | XII | | | | | | | |
| | Others | | | | | | | |

| 12 (a) | Name & Address of NRI working abroad (relation within the definition of GO(MS)No.243/2014 /H&FWD dated 6-8-2014) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|--|-------------|------------|----------------|---------|----------|----------------|-------------|------------|------------------|---------|--|--|--|--|--|--|-------------------------------------|--|--|--|------------|--|--|--|--------------|--|--|--|------------|--|--|--|-----------------------------|--|--|--|
| 12 (b) | Relationship of Applicant with NRI Guardian (please furnish relevant relation) <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Brother <input type="checkbox"/> Sister <input type="checkbox"/> First Cousin <input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Brother of Father <input type="checkbox"/> Sister of Father <input type="checkbox"/> Brother of Mother <input type="checkbox"/> Sister of Mother <input type="checkbox"/> Brother (First Cousin) of Father <input type="checkbox"/> Sister (First Cousin) of Father <input type="checkbox"/> Brother (First Cousin) of Mother <input type="checkbox"/> Sister (First Cousin) of Mother <input type="checkbox"/> Half Brother <input type="checkbox"/> Half Sister <input type="checkbox"/> Adopted Father <input type="checkbox"/> Adopted Mother | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 13 | Marks obtained in qualifying Examination (Plus Two (XII)/ Equivalent) <table border="1" data-bbox="225 898 1445 1272"> <thead> <tr> <th data-bbox="225 898 804 943">Subject</th> <th data-bbox="804 898 1050 943">Marks obtained</th> <th data-bbox="1050 898 1251 943">Max. Marks</th> <th data-bbox="1251 898 1445 943">% of Marks</th> </tr> </thead> <tbody> <tr> <td data-bbox="225 943 804 987">Part I – English</td> <td data-bbox="804 943 1050 987"></td> <td data-bbox="1050 943 1251 987"></td> <td data-bbox="1251 943 1445 987"></td> </tr> <tr> <td data-bbox="225 987 804 1066">Part II – Additional Language (.....)</td> <td data-bbox="804 987 1050 1066"></td> <td data-bbox="1050 987 1251 1066"></td> <td data-bbox="1251 987 1445 1066"></td> </tr> <tr> <td colspan="4" data-bbox="225 1066 1445 1111">Part III – Optional Subjects</td> </tr> <tr> <td data-bbox="225 1111 804 1144">1. Physics</td> <td data-bbox="804 1111 1050 1144"></td> <td data-bbox="1050 1111 1251 1144"></td> <td data-bbox="1251 1111 1445 1144"></td> </tr> <tr> <td data-bbox="225 1144 804 1182">2. Chemistry</td> <td data-bbox="804 1144 1050 1182"></td> <td data-bbox="1050 1144 1251 1182"></td> <td data-bbox="1251 1144 1445 1182"></td> </tr> <tr> <td data-bbox="225 1182 804 1227">3. Biology</td> <td data-bbox="804 1182 1050 1227"></td> <td data-bbox="1050 1182 1251 1227"></td> <td data-bbox="1251 1182 1445 1227"></td> </tr> <tr> <td data-bbox="225 1227 804 1272">Total for Optional Subjects</td> <td data-bbox="804 1227 1050 1272"></td> <td data-bbox="1050 1227 1251 1272"></td> <td data-bbox="1251 1227 1445 1272"></td> </tr> </tbody> </table> | | | | | Subject | Marks obtained | Max. Marks | % of Marks | Part I – English | | | | Part II – Additional Language (.....) | | | | Part III – Optional Subjects | | | | 1. Physics | | | | 2. Chemistry | | | | 3. Biology | | | | Total for Optional Subjects | | | |
| Subject | Marks obtained | Max. Marks | % of Marks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Part I – English | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Part II – Additional Language (.....) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Part III – Optional Subjects | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. Physics | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2. Chemistry | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Total for Optional Subjects | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 14 | Details of Entrance Test qualified (NEET 2016) <table border="1" data-bbox="225 1352 1474 1464"> <thead> <tr> <th data-bbox="225 1352 437 1391">Roll No.</th> <th data-bbox="437 1352 660 1391">Score Obtained</th> <th data-bbox="660 1352 884 1391">Total score</th> <th data-bbox="884 1352 1050 1391">Percentile</th> <th data-bbox="1050 1352 1294 1391">All India Rank</th> <th data-bbox="1294 1352 1474 1391">Remarks</th> </tr> </thead> <tbody> <tr> <td data-bbox="225 1391 437 1464"></td> <td data-bbox="437 1391 660 1464"></td> <td data-bbox="660 1391 884 1464"></td> <td data-bbox="884 1391 1050 1464"></td> <td data-bbox="1050 1391 1294 1464"></td> <td data-bbox="1294 1391 1474 1464"></td> </tr> </tbody> </table> | | | | | Roll No. | Score Obtained | Total score | Percentile | All India Rank | Remarks | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

DECLARATION

Details provided above are correct and accurate to the best of my knowledge. I have read the terms and conditions carefully and agree to abide by the same. I understand that my candidature is liable to be rejected if any of the above information is found to be false or misleading. Decision of the Director, Amala Institute of Medical Sciences shall be final and binding upon me.

Place:

Date:

Signature of the Applicant

Details of the Application/ Processing Fee enclosed

| DD Number & Date | Name of the Bank & Branch | Amount |
|------------------|---------------------------|---------|
| | | 5,000/- |