RAJIV GANDHI AYURVEDA MEDICAL COLLEGE & HOSPITAL, MAHE

(GOVERNMENT OF PUDUCHERRY INSTITUTION)

CHALAKKARA –NEW MAHE P.O - PIN 673311

Website: www.rgamc.in, E-mail: ayurmahe@gmail.com, Phone: 0490-2337340,41

APPLICATION FOR ADMISSION TO BAMS COURSE - 2022-23
(NRI / NRI Sponsored / Foreign Students)

Affix recent passport size photograph

(TO BE FILLED IN BLOCK LETTERS ONLY)

Tick (✓)the category under which is application is submitted

NRI ☐ **NRI Sponsored** ☐ **Foreign** ☐

1. Name of candidate : _____

2. Date of birth(DD/MM/YYYY) : ☐☐☐☐☐☐☐☐

3. Place of Birth : _____
CITY STATE COUNTRY

4. Gender : **Male** ☐ **Female** ☐

5. Religion & Caste :

6.Name of Parents : **Father:**

Mother:

7. Name of the sponsor : **Relationship:**
(for NRI sponsored category)

8. Current Postal Address :

9. Permanent postal address :

9. Contact Number :

10. E-mail :

11. Address of Local Guardian : **Relationship:**

12. Institution last studied : **Country:**

12. **Details of Qualifying Examination:**

Name of Examination	Board/University	Month & year of Passing	Remarks

13. **Marks obtained in qualifying examination:**

Subjects	Marks obtained	Maximum marks	Percentage/ Grade
Physics			
Chemistry			
Biology			
Mathematics			
English			

14. NEET Score :

15. NEET Application Number :

DECLARATION

I hereby declare that all the particulars stated in this application form are true to the best of my knowledge and belief. I have read and understood all provisions of admissions and agree to abide by them. In the event of submission of fraudulent, Incorrect or untrue information or suppression or distortion of any fact likes educational qualification, marks, nationality, etc., I understand that my admission / degree are liable for cancellation. I further understand that my admission is purely provisional subject to the verification of the eligibility conditions. I am also aware of the financial obligation of applying to and studying at this institution and I undertake to pay the tuition and other fees payable to the institution and to abide by all rules and regulations of the institution.

Signature of the Candidate Signature of the parent

Place:
Date:

Note:
1. Incomplete or late application will not be considered.
2. Application form should be filled up by the candidate in his / her own handwriting
3. Do not overwrite the entries.
4. All the columns must be filled in (write NA wherever not applicable)
5. Attach Copies of Qualifying Exam Mark list, NEET score card, Age proof, SSLC, TC&CC, Passport copy of Sponsor, Passport copy of Applicant (NRI Candidates)
6. NEET Score Sheet

IMPORTANT INSTRUCTIONS TO THE CANDIDATES FOR SUBMISSION OF APPLICATION FORMS

The application forms for admission to the BAMS (NRI/NRI Sponsored /Foreign quota) along with Information Bulletin 2022-23 can be downloaded from the institution website **www.rgamc.in**. The downloaded application form should be filled up by the candidate in his / her own handwriting in CAPITAL letters and duly signed by the candidate. No other form of application is permitted.

The candidate is advised to read the Information Bulletin 2022-23, before filling up the application form and ensure that no column is left blank. In the event of rejection of the application form, no correspondence will be sent. The status may be known from the institute website while publishing the merit list.

The ***filled up Application form*** with recent Passport Size ***Photograph,*** pasted on the space provided, shall be considered only when submitted with necessary self attested ***copies of certificates*** and ***Demand Draft*** (Candidate's name written behind the DD) for application fee. (**US $ 15 or INR 1,000/**- in the form of a bank draft / cash/ cheque drawn from a nationalized bank in favour of **THE PRINCIPAL, RAJIV GANDHI AYURVEDA MEDICAL COLLEGE, MAHE,** payable at **Mahe**.)

Demand draft and other enclosures can be stapled / tagged together with the application form. They shall be sent by post/courier or can be submitted in person to **The Principal, Rajiv Gandhi Ayurveda Medical College & Hospital, Mahe, Chalakkara, New Mahe- P.O- 673311** on or before **07th October 2022 by 5.00 PM (IST).**

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