

# THE SANKARA NETHRALAYA ACADEMY

(Unit of Medical Research Foundation)

"Dr. V. G. Appukutty Campus" No. 8, GST Road, St. Thomas Mount, Chennai - 600 016. Ph No. 044- 49086000 Email: <u>snacademy@snmail.org</u> <u>www.thesnacademy.ac.in</u>



APPLICATION F	FORM FOR	UG	/ PG (	COUI	RSES		Aca	demic	Year:
Registration Deta	uils: (To be fille	d bv	TSNA	officia	al)				
Registration Date:	Registrati			<u></u>	<u></u>				
Remarks:	Registrati	ion –	in-charg	e (Sigr	ı)			Recent Colour	-
<ul> <li>Instructions to the Candidates before filling application form:</li> <li>1. Fill in all columns, put –NA– if not applicable</li> <li>2. Incomplete application forms will be summarily rejected</li> <li>3. Applications submitted without proof of payment will not be considered</li> <li>4. A candidate must be 17 years of age at the time of admission or would complete 31<sup>st</sup> December of the year of admission (* <i>B.Sc- MLT only</i>)</li> </ul>						Passport Photogra or befor	ıph		
Course Name: (Please tick in the Master of Optometry (M. C		mn)	Master	of Hos	nital A	dmini	stratio	n	
MBA – Hospital Managem			BBA – H	-	-				
M. Sc – Medical Laboratory			B. Sc –					ology	
Name of the Applicant wit	h initials (as in +:	2 Ma	rk Sheet	: – in B	LOCK	letters	)		
Expansion of Initials									
Gender (Please tick) Ma	ale Female Ne	eutral		Place	of Birth	l			
Date of Birth D D	M M Y Y	Y	Y	Age:					
Nationality	Religion			Com	munity				
Address for Communication	1			Blood	Group				
Pin Code									
E-mail ID									
Mobile No.									
Aadhar (UIDAI) No									
			<u> </u>			I	<u> </u>		Page -

Name of Guardian (If student not staying with parents)

Parent/Guardian Address for Communication (If different from above address)

Pin Code

E-mail ID

Phone with STD Code

Mobile No.

## **Details of Educational Qualifications**

Course Stu	udied	Major Subjects	Month & Year of Passing	Name of the School / College / University	Medium	Aggregate % Marks / Class
SSLC / 10 <sup>th</sup>	Std					
Hr. Sc. / 12 <sup>th</sup>	<sup>1</sup> Std					
Under Graduate						

(Enclose Self-attested copies of SSLC / Hr. Secondary certificates and UG Provisional Certificates or Degree Certificates.)

## **Transfer Certificate Details (Mandatory for all courses)**

Certificate No	Date of Issue
Issuing Institution	Issuing Authority

## **Eligibility Certificate Details (If applicable)**

Certificate No	Date of Issue
Issuing University	Issuing Authority

#### Migration Certificate Details (If applicable)

Certificate No	Date of Issue
Issuing Institution	Issuing Authority

## **Community Certificate Details (If applicable)**

Certificate No	Date of Issue
Issuing Location	Issuing Authority

# Language Proficiency (Tick appropriately)

Lunguage Homeleney (Hen appropriately)				
	Language (Specify)	Able to Speak	Able to Read	Able to Write
Mother Tongue				
	English			
Additional				
Additional				

## Have you attended any Educational Programme at Sankara Nethralaya?

Course Attended	Period		
Course Attended	From Date	To Date	

## Additional Courses and Programmes Attended, elsewhere, if any, other than the above

<b>Course Description</b>	Organized by	Duration

## **Others:**

Do you require hostel accommodation? Yes / No (Applicable for girls only)

#### **Sources of Funding (Please tick)**

(i) Own	
(ii) Student Loan	
(iii) External Scholarship	
(iv) Others	

## **References:**

1.	2.

## **Registration Fee Payment Details**

- 1. DD drawn in favour of "Medical Research Foundation" Payable at Chennai
- 2. TSNA Bank Details for on-line payment

City Union Bank: Purasawalkam Branch	Name : Medical Research Foundation
Account no : 112001001089459	IFSC Code : CIUB0000112

## Mode of payment: Cash/DD/Online/Card (Please tick)

DD No. / Online Ref.No:	Rs.
Date:	Bank:

## Note:

- **1.** Registration fee for UG courses Rs.1,000/- & for PG courses Rs.1,500/-
- 2. Registration fee is payable while submitting filled–in applications
- **3.** Registration fee is not refundable
- 4. Candidate should write his / her name on the reverse of the Demand Draft
- 5. Incomplete application will not be considered

## **Declaration**

I hereby declare that the particulars given above are true to the best of my knowledge. If any of the particulars furnished are later found to be false, I agree to forfeit my admission without claiming any refund. We assure strict adherence to TSNA's regulations after admission.

We undertake the responsibility to pay all prescribed fees on or before the scheduled dates.

## Date:

Place:

Signature of the Candidate	Signature of Parent / Guardian

## **Enclosures:**

Note: Attested photocopies of the following should be enclosed along with the application form

- 1. SSLC, HSC, Degree Certificates(for PG applications)
- 2. Community certificate, Transfer certificate, Migration certificate, Eligibility certificate (as applicable)
- 3. Proof of attainments, if any, in extracurricular activities and other training undergone
- 4. Two passport size photographs (recent)
- 5. Copy of Aadhar Card
- 6. DD or copy of Bank details to be enclosed
- 7. Professional experience certificate from the organization (if any)

# Filled in application form with enclosures to be forwarded to:

The Head of the Department – with Course Name /

# The Assistant Registrar

The Sankara Nethralaya Academy "Dr. V. G. Appukutty Campus" No. 8, GST Road, St. Thomas Mount, Chennai - 600 016. Ph. No. 044 - 49086000