



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: snacademy@snmail.org
www.thesnacademy.ac.in



APPLICATION FORM FOR UG / PG COURSES		Academic Year :
Registration Details: (To be filled by TSNA official)		Recent Colour Passport size Photograph
Registration Date:	Registration No:	
Remarks:	Registration-in-charge (Sign)	
Instructions to the Candidates before filling application form:		
<ol style="list-style-type: none"> Fill in all columns, put -NA- if not applicable Incomplete application forms will be summarily rejected Applications submitted without proof of payment will not be considered A candidate must be 17 years of age at the time of admission or would complete 17 on or before 31st December of the year of admission (* B.Sc-MLT only) 		

Course Name: (Please tick in the appropriate column)

Master of Optometry (M. Optom)	<input type="checkbox"/>	Master of Hospital Administration	<input type="checkbox"/>
MBA - Hospital Management	<input type="checkbox"/>	BBA - Healthcare Management	<input type="checkbox"/>
M. Sc -Medical Laboratory Technology	<input type="checkbox"/>	B. Sc -Medical Laboratory Technology	<input type="checkbox"/>

Name of the Applicant with initials (as in +2 Mark Sheet – in BLOCK letters)

<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"/>	<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"/>	<input type="text"/>	<input type="text"/>
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Expansion of Initials	<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"/>	<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"/>	<input type="text"/>
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Gender (Please tick)	<input type="checkbox"/> Male	<input type="checkbox"/> Female	<input type="checkbox"/> Neutral	Place of Birth	<input type="text"/>
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Date of Birth	<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"/>	Age:	<input type="text"/>
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Nationality	<input type="text"/>	Religion	<input type="text"/>	Community	<input type="text"/>
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Address for Communication	<input type="text"/>	Blood Group:	<input type="text"/>
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Pin Code	<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"/>
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E-mail ID	<input type="text"/>
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Mobile No.	<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"/>	<input type="text"/>	<input type="text"/>
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Aadhar (UIDAI) No	<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"/>	<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"/>	<input type="text"/>
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Parent Name	
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 Studied	Major Subjects	Month & Year of Passing	Name of the School / College / University	Medium	Aggregate % Marks / Class
SSLC / 10 th Std					
Hr. Sc. / 12 th 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)

	Language (Specify)	Able to Speak	Able to Read	Able to Write
Mother Tongue				
	English			
Additional				

Have you attended any Educational Programme at Sankara Nethralaya?

Course Attended	Period	
	From Date	To Date

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

Course Description	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.
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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: 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)

Filed 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,
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