

DD No.	Name of Bank & Branch	Date	Amount

APPLICATION FORM

ADMISSION TO POST GRADUATE DEGREE IN YOGA & NATUROPATHY

M.D. (YOGA & NATUROPATHY)

2016-2017.

Application No. :

<p>Space for photograph (To be Self attested)</p>
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1. Name of the Candidate :
(as in certificate)

2. Father's Name :

3. Date of Birth :

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4. Sex (please tick) :

M	F
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5. Nationality :

6. Nativity :

Evidence to be produced :
(Not required if the candidate has studied from 9th std. to BNYS course in Tamil Nadu)

Signature of Candidate

7. Community (please tick) :

OC	BC	BCM	MBC/DC	SC	SCA	ST
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8. Name of the Caste and Sl.no. :

9. Mother Tongue :

10. Languages Known : 1. 2. 3. 4.

11.(a). Mailing Address (Residential) :

Land line No.

Mobile Nos.

E-mail I.D:

(b). Office Address, if any

12.(a). Qualification :

(b). College from which passed and
Affiliating University. :

(c) Is this Degree recognized by the Central
Council of Indian Medicine, New Delhi :

(d). Month and Year of Passing the Final :
Year (Class if any in which passed)

(e). Date of completion of the Internship :
(Enclose proof)

Signature of Candidate

13. Medical Registration Number :
Allotted by Board of Indian Medicine
(Details to be furnished in application
or to produce before counselling)
14. Nature of employment held :
subsequent to passing of BNYS/
equivalent course with duration.
15. Whether Service candidate or
Non Service candidate
(Refer Para VI of the Prospectus)
16. Are you applying under any special
Category mentioned in (Para-V, if yes,
Specify the category)

Signature of the candidate.

(Both Service & Non Service Applicants)

FOR SERVICE CANDIDATE ONLY

17. Date of first appointment in :

D	D	/	M	M	/	Y	Y
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Tamil Nadu Medical Service

18. Service status (please tick) : Temporary / Probationer/ Approved probationer

19. Whether selected by Tamil Nadu
Public Service Commission and if yes

Year of publication of result :

20. Date of joining in service as TNPSC candidate:

21. Date of Regularization :

22. Date of completion of probation :

23. Total Service as on 31.03.2016 : Year Month Days

24. Whether any disciplinary proceedings :

are pending against the candidate

if so, present stage.

25. Details of contractual obligation to the :

Government if any.

Signature of the candidate.

(only service applicants)

Place:

Date:

DECLARATION BY THE CANDIDATE - I

IS/o D/o
do hereby solemnly and sincerely affirm that the statements made and information furnished in my Application Form as also in all the enclosures thereto submitted by me are true to the best of my knowledge and belief.

Should it however be found that any information furnished therein is untrue. I realize that I will be liable for criminal prosecution and agree to forego without demand, my seat in the College at any stage.

Station:

Date :

Signature of the candidate.

DECLARATION BY THE CANDIDATE -II

I have not undergone the Post Graduate Degree in Yoga & Naturopathy Medicine in anyone of the disciplines and discontinued the course on my own accord (or) on any other grounds after 6 months from the date of joining the course.

Station:

Date :

Signature of the candidate.

ANNEXURE - I

CERTIFICATE OF NATIVITY IN TAMIL NADU

Certified that Dr.

S/o. D/o./ W/o. Thiru.....

an applicant for admission to Post Graduate studies is a permanent resident of

..... in the

Taluk.....

District.....

State.....

Signature of the Village Administrative Officer.

Office Seal:

Signature:

Name and Designation:

Station:

Date:

The certificate should be obtained from an Officer of the Revenue Department not Lower in rank than that of a Deputy Tahsildar in the Taluk concerned as per the Instructions.

ANNEXURE II
SERVICE PROFORMA

The service particulars of Dr.

S/o. D/o. W/o. Thiru.

who is an applicant for admission to M.D., (Yoga & Naturopathy) Course 2016-2017 session are hereby furnished.

1. Designation of the Present Post.

2. Service Status (Tick Appropriate Box) : Govt of TN Service/ Panchayat Union service / GOI service / Undertakings /Organisation of GOI / GO TN.

Undertaking/ Organisation	Panchayat Union Service	Govt. Service GOI / Govt. of Tamil Nadu

3. Date of First Appointment

TNMS / GOI / Panchayat :

4. Duration of Service as on 31.03.2016

5. Details of posts held and place of service

POST HELD	Nature of Service	PLACE	DURATION	
			FROM	TO

(If space is not sufficient, separate sheet indicating the above particulars should be enclosed with)

Signature and office seal of the
competent forwarding authority

6. If the candidate is under any subsisting Contractual obligation to the Govt. for any Reason, then details.
7. Are there any Criminal Proceedings, Inquiry or Disciplinary Proceedings pending or Contemplated against the candidate. If so, application should not be forwarded.
8. Whether the candidate has produced an undertaking as mentioned in prospectus Section vi - para 63
9. Whether the Candidate has worked in a hilly area? If so, the details duration of service and with the place of posting etc. may be furnished. The leave if any, without Casual Leave, shall be Excluded

Station:

Signature:

Date:

Office Seal:

Note: All applicants should obtain service certificate from the competent authority Applications without Service Particulars duly authenticated by the competent authority are liable for rejection.

Candidates above 50 years as on 31.03.2016 are not eligible to apply.

ANNEXURE III

DISCIPLINE DECLARATION BY THE CANDIDATE

I _____ undersigned, a student selected for admission in the _____ course in Govt. Yoga & Naturopathy Medical College, Chennai do hereby agree to conform from this date if I am admitted there to the rules and regulations including those relating to the Hostel laid down or to be laid down hereafter by the Principal of the college for the time being for the due maintenance of discipline at the said college and I assured that I will not join any agitation/strike of any kind during the course of study. I further agree to make good when called upon to do so to the Government of Tamil Nadu any damage to furniture, apparatus or other articles which may be caused by any carelessness, negligence wantonly on my part.

2. I will not indulge or participate in any kind of ragging and if found to have indulged in ragging in the past or noticed later, am aware that I will be removed from the roll of the institution at whatever stage of study and criminal action will be taken against me.

Signature of Candidate's Parent/Guardian

Signature of the
Candidate

CHECK LIST

Candidates are requested to check the list of Self attested Xerox certificates / documents to be furnished along with the filled in Application Form.

(1) Filled in Application Form (stitch the following attested photocopies of Documents to the Application Form) with Photograph.

- (2) a. Birth certificate.
(H.S.C. Certificates or School Leaving Certificates or College Leaving Certificates to be furnished.)
- b. Community Certificate obtained only from the competent authority.
- c. BNYS / equivalent and First Year to Final Year Mark Sheets.
- d. Internship Completion Certificate or Certificate from the Principal.
- e. BNYS/ equivalent Degree/Provisional Pass Certificate issued by the University.
- f. Medical Registration Certificate.
- g. Two recent Conduct Certificates in original issued by Group A or B Officers of Government of Tamil Nadu or Government of India.

Submit the following enclosures along with the filled in Application Form. Do Not stitch the following with the application form. Use GEM CLIP for Attachment to the application form.

(i). Two Self addressed envelopes with postage stamp for Rs.40/- affixed each for Sending examination marks and Hall Ticket

(ii).Hall Ticket in duplicate (with recent photo)

(3) Nativity certificate

M.D(Yoga & Naturopathy) 2016- 2017 session Scrutiny Form

(To be filled in by the candidate as per the entries made in application form)

Application No.

No	Details									
1	Name in Capital Letter	Dr.								
2	Mailing Address Pin Code: Contact Phone No. with STD code Mobile No. e-mail I.D									
3	Date of Birth	Date	Month	Year						
4	Nativity	TN			Others					
5	Mother Tongue	Tamil			Others					
6	Community	OC	BC	BCM	MBC	SC	SCA	ST		
7	Service Particulars	Service Candidate				Non-service Candidate				
8	Date of Completion of CRR I Training	Date			Month		Year			
9	Total Number of years as on 31.03.2016 after completing CRR I to a maximum of 10 years									
10	Medical Registration No. and Date of Registration									
11	Service Status: 1.State Govt. 2.Central Govt 3.TN Govt.Undertaking/ Local Bodies in TN 4.Central Govt. Undertaking in TN									
12	BNYS Final Year Mark									

13	Years served in the Hill Area (Excluding leave other than C.L.)	Years	Months	Days	
14	Whether Discontinued PG Degree Previously, if yes, State Branch and Date of the Discontinuation.	Branch and Date			

I sincerely affirm and state that the information furnished above are true and correct to the best of my knowledge and belief.

Station:

Date:

CANDIDATE'S SIGNATURE.

Office Use Only.

Remarks:

Scrutinising Officer.

Signature

Date

COMMISSIONERATE OF INDIAN MEDICINE AND HOMOEOPATHY
ENTRANCE EXAMINATION FOR ADMISSION TO THE POST GRADUATE
DEGREE COURSE IN YOGA & NATUROPATHY

2016- 2017 SESSION

Identification slip

Candidate to sign here

Affix passport size
photo. To be Self
attested

Application No.

Name and Address

of the candidate:

Candidate's signature at the time of Examination:

Signed before me, identification verified by me with reference to Hall Ticket

Signature of the Invigilator.