

TELANGANA PRIVATE MEDICAL & DENTAL COLLEGES MANAGEMENT ASSOCIATION

MCET-AC-2015

Exam Date: 03-06-2015

User Guide to fill the online application form

STEP 1: Instructions- Important

1.1 The on-line application form will be available on the website www.tgmedco.com from 24-05-2015 (Sunday) 7.00 AM to 28-05-2015 (Thursday) 2.00 PM.

Note: The candidates are advised to take a print out of the Prospectus / Instructions to fill the application form from the website www.tgmedco.com before proceeding to fill the application form.

1.2 The candidate should fill the online application form available in the Website with the data required-for, through internet. The online application form can be filled through any computer with internet connection (home/internet café/net center). The candidate is advised to fill the online application form after going through the Prospectus by keeping Scanned Photo and Signature in the .jpg format separately (as shown below) and ready to enter his/her correct data and upload the photo and signature after the payment of application fee through Online.

1.3 Procedure of filling online application and Procedure for online payment:

- The fee can be paid through Debit card / Credit card or Net Banking
- The fee paid by the applicants is not refundable under any circumstances.
- Read the Notification, Prospectus / Regulations carefully.
- Keep all the following documents required:
 - Scanned Photo (80 kb in size).
 - Scanned Signature.
 - Credit card / Debit card.
- Visit website through Internet Explorer (version 7 to 11) or Mozilla Firefox (14 to 34) or Google Chrome (20 to 36) to fill the application form.

STEP 2: Registration Process

- After Enter in to www.tgmedco.com click on application form link.
 - You will get the registration from as shown below.
- Please read the User Guide Carefully Before going to fill the Application form.

TELANGANA MCET-AC-2015

- 1 Notification
- 2 Prospectus
- 3 User Guide
- 4 Online Registration Link
(Please read Prospectus / User Guide Carefully before Clicking this Link for Registration / Payment & Submission of Final Application)
- 5 Online Payment
- 6 Application Form Login
(Login with the USERNAME and PASSWORD that has been Sent to your EMAIL and MOBILE NUMBER)

Notification for condu

Consensual Agreemer

For Students

For Colleges

- Click On Online Registration Link.
- Then you will be redirected to below page.

Telangana Private Medical & Dental College Management's Association

(Registration No: 57 of 2015)

Website: www.tgmedco.com | Email: tgmd2015@yahoo.in Contact: 040 65512887
Address: 8-2-293/82/J-111/565 P No. 565/ Co. Op House Building Society, Jubilee Hills, Hyderabad

Registration Form

Note Kindly use Internet Explorer(version 7 to 11) or Mozilla Firefox(14 to 34) or Google Chrome(20 to 36) to fill the Registration Form.

Please fill below details and submit the form to receive the user id and password through Mail and/or SMS.

After receiving User id and password, you have to Re-login to upload photograph and to print the same.

After Getting USER ID and Password, click on Payment link provided at www.tgmedco.com , give your User ID and Name to complete payment.

After payment wait for 2 hours and click on Application form link provided at www.tgmedco.com , login with User ID and password and click on edit to fill the required details and submit the application.

If you do registration and payment after 6 PM, You have to proceed further process after 10 AM next day.

Please check your registered email id for further details.

Registration Form

*Qualifying Examination

Note: Name and DOB to be entered as given in X/XII Std Certificate.

*Name of the Applicant
(First Name) (Middle Name) (Last Name)

*Father's Name
(First Name) (Middle Name) (Last Name/Initial)

*Date of Birth 

*Mobile No
(Enter your 10 digit without prefixing 0)

*Confirm Mobile No

*Email Address

*Confirm Email

SSC/10th Class Hall Ticket Number

*Category


Same Name need to give while doing payment is payment GATE WAY

Enter Valid Mob and mail ID. Your will get user name and password to mob num and Mail id

Declaration

The above details provided by me are correct and true to my knowledge.

Please enter the letters displayed in the image below.
If the image is not clear, click on "Can't read the text? Get a new image"



6 b7 y7 2 i

Get New Image

Type the text shown in the image above.
Enter 7 characters. No spaces.
No special characters.No UPPER CASE.

Help

- Valid Mobile number and Email address is mandatory to fill application from.

Note: On submission of this form you will receive your "user id" and "password" on your above registered "email id" and/or "mobile number".

After Getting USER ID and Password, click on Payment link provided at www.tgmedco.com , give your User ID and Name to complete payment.

After payment wait for 2 hours and click on Application form link provided at www.tgmedco.com , login with User ID and password and click on edit to fill the required details and submit the application.

If you do registration and payment after 6 PM, You have to proceed further process after 10 AM next day.

Please check your registered email id for further details.

I Agree

Register

Version10.00.01

- After clicking on I Agree you will get USER ID and Password to your registered Mobile Number and Email ID .
- Keep User id and Password safely for future reference.
- After getting User ID and Password ,Please revisit www.tgmedco.com

1 Notification

2 Prospectus

3 User Guide

4 Online Registration Link
(Please read Prospectus / User Guide Carefully before Clicking this Link for Registration / Payment & Submission of Final Application)

5 Online Payment

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Notification for condi

Consensual Agreeme

For Students

For Colleges

Click on Online Payment and Keep your User id ,Credit Card or Debit Card or Netbanking details Ready with you.

- After Click on online payments you will be redirected to Bank website..

भारतीय स्टेट बैंक
State Bank of India
The Banker to Every Indian

State Bank Collect

Products & Services Know More

STATE BANK COLLECT
A MULTI-MODAL PAYMENT PORTAL

DISCLAIMER CLAUSE

डिस्क्लेमर क्लॉज़ हिंदी में देखने हेतु [यहां क्लिक करें](#).

[Click here](#) to view the disclaimer clause in Hindi.

Terms Used:

- ▶ **Corporate Customer:** Firm/Company/Institution (F/C/I) collecting payment from their beneficiaries.
- ▶ **User:** The beneficiary making a payment to F/C/I for the services/goods availed.
- ▶ Bank shall not be responsible, in any way, for the quality or merchantability of any product/merchandise or any of the services related thereto, whatsoever, offered to the User by the Corporate Customer. Any disputes regarding the same or delivery of the Service or otherwise will be settled between Corporate Customer and the User and Bank shall not be a party to any such dispute. Any request for refund by the User on any grounds whatsoever should be taken up directly with the Corporate Customer and the Bank will not be concerned with such a request.
- ▶ Bank takes no responsibility in respect of the services provided and User shall not be entitled to make any claim against the Bank for deficiency in the services provided by the Corporate Customer.
- ▶ The User shall not publish, display, upload or transmit any information prohibited under Rule 3(2) of the Information Technology (Intermediaries guidelines) Rules, 2011.
- ▶ In case of non-compliance of the terms and conditions of usage by the User, the Bank has the right to immediately terminate the access or usage rights of the User to the computer resource of the Bank and remove the non-compliant information.

I have read and accepted the terms and conditions stated above.
(Click Check Box to proceed for payment.)

Proceed

- After Given Proceed you will be redirected to below page

You are here: State Bank Collect > State Bank Collect

State Bank Collect

- Reprint Remittance Form
- Payment History

State Bank Collect

TELANGANA PRIVATE MEDICAL AND DENTAL COLLEGES MA

VOOP HOUDR BLDG SOCIETY JUBILEE HILSS HYDERABAD, , HYDERABAD-500034

Provide details of payment

Select Payment Category *

- Select Category--
- Select Category--
- MCET-AC-2015

SELECT ASSESSMENT NAME



Mandatory fields are marked with an asterisk (*)

- The payment structure document if available will contain detailed instructions about the online payment process.
- Date specified(if any) should be in the format of 'ddmmyyy'. Eg., 02082008

After selecting MCET-AC-2015 you will get Below Page.

You are here: State Bank Collect > State Bank Collect

State Bank Collect

- Reprint Remittance Form
- Payment History

State Bank Collect

23-May-2015 [03:51]

TELANGANA PRIVATE MEDICAL AND DENTAL COLLEGES MA

VOOP HOUDR BLDG SOCIETY JUBILEE HILSS HYDERABAD, , HYDERABAD-500034

Provide details of payment

Select Payment Category *

MCET-AC-2015

USER ID(Enter same user id received by sms) *

APPLICANT NAME *

MOBILE NUMBER *

EXAM FEE *

Fixed:Rs.1800

Remarks

ENTER 7 digit USER ID received to your registered mail id and mobile number

Please mention same APPLICANT NAME AND MOBILE NUMBER as mentioned in REGISTRATION FORM. Otherwise payment not valid

- Please enter USER Id received to registered mobile number and email id.
- Applicant Name and Mobile Number given in registration form and entered here has to match.
- Otherwise payment will not be processed.
- So, Please be careful while entering User ID, Name and Mobile Num.

• Further process visit www.tgmedco.com

Please enter your Name, Date of Birth & Mobile Number. This is required to reprint your e-receipt / remittance(PAP) form, if the need arises.

Name *

Date of Birth *

Mobile Number *

Enter the text as shown in the image *

⚡ Mandatory fields are marked with an asterisk (*)
 ⚡ The payment structure document if available will contain detailed instructions about the online payment process.

- After Entering required details, Please click on submit Button.
- Then you will get Below page.
- Please confirm the details.


State Bank Collect State Bank MOPS Pay EPFO

You are here: State Bank Collect > [State Bank Collect](#)

22-May-201

State Bank Collect

Verify details and confirm this transaction

 Name TELANGANA PRIVATE MEDICAL AND DENTAL COLLEGES MA

Category MCET-AC-2015

USER ID(Enter same user id received by sms) 0000002

APPLICANT NAME XXXXXXXXXXXXXXXXXXXX

MOBILE NUMBER 9032010202

EXAM FEE 20

Total Amount INR 20.00

Remarks

⚡ Please ensure that you are making the payment to the correct payee.

➤ After given confirm you will be redirected to

State Bank MOPS
Multi Option Payment System

State Bank Collect

NET BANKING	CARD PAYMENTS
<p>State Bank of India Bank Charges: 0.0</p> <p>State Bank of Bikaner and Jaipur Bank Charges: 0.0</p> <p>State Bank of Hyderabad Bank Charges: 0.0</p> <p>State Bank of Mysore Bank Charges: 0.0</p> <p>State Bank of Patiala Bank Charges: 0.0</p> <p>State Bank of Travancore Bank Charges: 0.0</p> <p>Other Banks Internet Banking Bank Charges: 0.0</p>	<p>This payment mode is not available between 23:30 hours IST and 00:30 hours IST</p> <p>State Bank ATM-cum-Debit Card Bank Charges: Rs 0.0</p> <p>Other Banks Debit Cards Bank Charges: Rs 0.0</p> <p>Credit Cards Bank Charges: Rs 0.0</p>

OTHER PAYMENT MODES

~~SBI BRANCH Bank Charges: 0.0~~

SBI Banks

SBI DEBIT CARDS

OTHER BANK DEBIT CARDS

CREDIT CARDS

- Please Choose your payment mode to complete payment.
- Please take printout of payment done receipt for Future Reference.

AFTER COMPLETION OF PAYMENT WAIT FOR 2 HOURS.

AFTER 2 HOURS VISIT www.apmedco.com AND CLICK ON APPLICATION FORM.

NOTE: If you do any payment after 6 PM , Please complete the application form next day after 10AM Only. After 6 PM you are not able to login into the application form till next day 10AM.

But if anybody do the registration and payment last date of registration, you can complete the application form on same day as timelines mentioned in the website. Please visit website for further details.

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- After click on Application form Login you will be redirected to below page.\

- Please enter user name and password received to your registered mobile number and email id.

**Telangana Private Medical & Dental College
Management's Association**
(Registration No: 57 of 2015)
Website: www.tgmedco.com | Email: tgpm2015@yahoo.in Contact: 040 65512887
Address: 8-2-293/82/J-111/565 P No. 565/ Co. Op House Building Society, Jubilee Hills, Hyderabad

Candidate Login

User Login

Application Sequence Number/User Id

Password

PLEASE ENTER USER ID AND
PASSWORD RECEIVED TO YOUR
REGISTERED MOBILE NUMBER
AND MAIL ID

- After login you will get below page.
- Please click on edit to complete the application form.

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Application Form

Application Number: **0000002**

Candidate Name: **RAMBABU VADLAMUDI**

Son/Daughter of: **XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX**

Date of Birth: **15/01/1914**

Category: **Others**

Qualifying Examination: **INTERMEDIATE-VOCATIONAL**

Mobile No: **9573288873**

Email ID: **rambabu.vadlamudi@gmail.com**

- After edit you get below page.

Telangana Private Medical & Dental College Management's Association

(Registration No: 57 of 2015)

Website: www.tgmedco.com | Email: tgpm2015@yahoo.in Contact: 040 65512887
Address: 8-2-293/82/J-111/565 P No. 565/ Co. Op House Building Society, Jubilee Hills, Hyderabad

Application Form

Note Kindly use Internet Explorer(version 7 to 11) or Mozilla Firefox(14 to 34) or Google Chrome(20 to 36) to fill the Application Form.
Use Mouse to move between fields for entry of data instead of using Tab Key.
Fields marked with *are mandatory.

1 Personal Information

Personal Details

Name of the Applicant	RAMBABU (First Name)	(Middle Name)	VADLAMUDI (Last Name)
*Father's Name	XXXXXXXXXXXXXXXX (First Name)	(Middle Name)	XXXXXXXXXXXX (Last Name)
*Mother's Name	<input type="text"/> (First Name)	<input type="text"/> (Middle Name)	<input type="text"/> (Last Name)

*Gender Male Female

*Birth State

*Qualifying Examination INTERMEDIATE-VOCATIONAL

*Date of Birth 15/01/1914

*Category OTHERS

*Medium of Language to take EAMCET- AC- 2015 Exam English Telugu

*Qualification Details

Name of School/College	School/College City	Name of the Board/University
<input type="text"/>	<input type="text"/>	<input type="text"/>

Permanent Address - to be used for verification

*Address Line 1

Address Line 2

Address Line 3

*Town/City

*State

*Pin code

*Mobile No 9573288873

*Confirm Mobile No 9573288873

*Email Address rambabu.vadlamudi@gmail.com

*Confirm Email Address rambabu.vadlamudi@gmail.com

Telephone No.

*Present address/Correspondence address Same as Permanent Address? Yes No

Exam City Preference

* Preferred Exam City Option 1: --Select--

* Preferred Exam City Option 2: --Select--

* Preferred Exam City Option 3: --Select--

Upload Scanned Copies

*Please upload scanned copies of your photo,signature here

Declaration

I hereby declare that I have carefully read the instructions and all the particulars stated in this application form are true and correct to the best of my knowledge and belief. If any of these information provided is found false/ incorrect, I shall abide by the actions and decisions taken by the MCET-AC-2015 Board.



I Agree

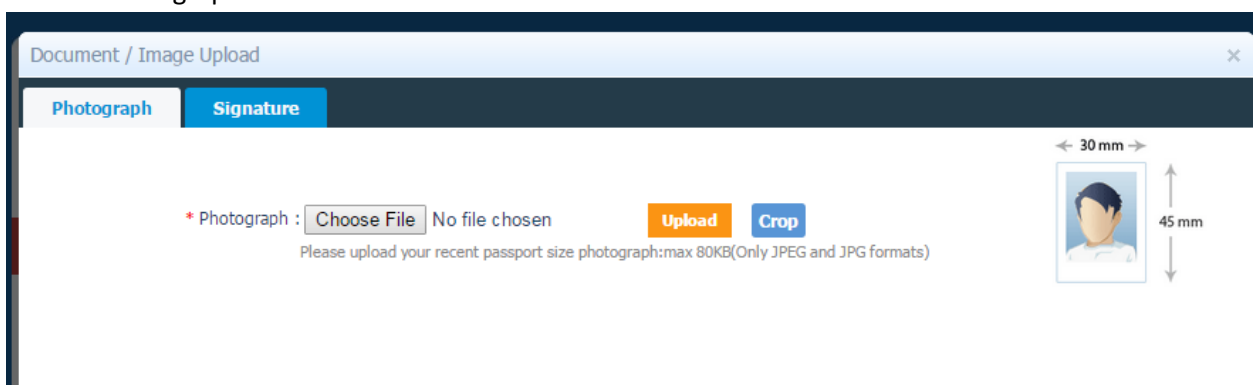
Preview Application

Submit

Uploading of Scanned copy of Photo and Signature

- After click on here (mentioned in above screen), You will get photo and signature tabs. Please upload your photo and signature. Please refer the attached screen shots.

Photograph



Signature:



As mentioned above, after registration you will get User ID ,Password and application link to your mail. Please print your application any time with these credentials.

IMPORTANT INSTRUCTIONS TO CANDIDATES:

- You will get the Mock Exam link at www.tgmedco.com by 24th May 2015. You can take the mock exam for thorough preparation for online exam.
- Any candidate resorting to malpractice in the Entrance Examination will have his / her examination invalidated and will be disqualified from appearing for Entrance Examination for the next 3 years.
- If a person impersonates a candidate, he / she will be disqualified from appearing for any Entrance examination for five years and if he/she is not on University rolls, will not be admitted to any course for five years and criminal case will be lodged against him/her in the police station, the candidate who is impersonated also will be disqualified for 5 years.
- Once application fee paid it cannot be refundable at any circumstances.

