APPLICATION NUMBER:	
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ADMISSION TO POST GRADUATE DEGREE COURSE M.D. (SIDDHA).

APPLICATION FORM 2013-2014

NATIONAL INSTITUTE OF SIDDHA,

TAMBARAM SANATORIUM, CHENNAI - 600 047

TAMIL NADU, INDIA

Ph: 044-22411611; Fax: 044-22381314

Email: nischennaisiddha@yahoo.co.in www.nischennai.org

APPLICATION FORM FOR ADMISSION TO

M.D. (SIDDHA) DEGREE COURSE 2013 –2014

NATIONAL INSTITUE OF SIDDHA, TAMBARAM SANATORIUM, CHENNAI-600 047.

Particulars of DD toward	s application fee	
Name of the Bank drawn o	n :	Affix passport size
DD No./Date	:	Photo duly
		attested by a
Amount	:	Gazetted Officer
1.Entrance Examination No	umber :	
(will be assigned by the N	National Institute of Siddha)	
2.Name of the candidate (i	n Block Letters)	
3. Date of Birth :		
4.Mailing Address :	Door No:	
	Street:	
	Village / Locality:	
	Taluk / Town:	
	District / City:	
	PIN CODE :	
Contact No.(Mobile/Ph.wit	h STD code):	
E.mail id:	11 512 code).	
5.6.1.4771.4.5	Male F	Female
5 Gender (Tick the Box)	•	

(OBC /SC / ST candidates should enclose	Gen	OBC	SC	ST		
attested photocopy of the Community						
Certificate issued by competent authorities)						
Certificate number :						
7. Sub - caste :						
7. Sub - Caste .						
8. Special Category :						
(Person with Locomotory Disability of						
lower limbs between 50 % and 70%. If in case candidates are not available in that						
category then the candidates with						
disability of lower limbs with 40% to 50% will be considered for admission.						
If yes, enclose a copy of certificate						
issued by a competent authority. The Certificate should not be older than 3						
months.						
9. Nationality :						
10. Nativity :						
(Evidence to be produced. Not required if the candidate has studied from IX std						
and / or has done the Professional course						
B.I.M / B.S.M.S in Tamil Nadu.)						
11. Mother Tongue :						
12. Qualification :						
13. The College from which passed and the affil						
University (Recognized by the Central Cou Indian Medicine, New Delhi)	ncii oi	:				
,						
14. Month and year of passing the final B.I.M /	B.S.M.S exa	am :				
15. No. of attempts for passing the final year ex	am	:				
16. Total marks obtained in final year with Cla	ass / Grade	:				

6. Community (Tick the Box)

17.	Registration No. of the final year examination in each attempt	:	
18.	Date of completion of the Internship (C.R.R.I)	:	
19.	Medical Registration Number given by Central Council of Indian Medicine/ Tamil Nadu Siddha Medical Council. (Self- Attested Photocopy to be furnished)	:	
20.	State/Country to which he/she belongs	:	
21.	Whether a passport holder? If Yes, furnish the details there of.	:	
22.	Whether you have passed /completed/ discontinued M.D(Siddha) course previously? If so, furnish the particulars	:	
23.	Whether the eligibility certificate has been obtained from The Tamil Nadu Dr. M.G.R. Medical University for admission to the M.D (Siddha) course? If so, the details may be furnished (for Foreign and other University candidates only)	:	
	PLACE: DATE :		

SIGNATURE OF THE CANDIDATE

DECLARATIONS BY THE CANDIDATE
I
Certified that I, Dr
S/o / D/o / W/o. Thiru
do hereby solemnly and sincerely affirm that the statement made and
information furnished in my application form as also in all the
enclosures thereto submitted by me are true.
However, if it is found that any information furnished therein is
untrue in particulars, I realize that I am liable for criminal
prosecution and agree to forego my seat in this Institute at any stage.
Station: Signature of the candidate
Date :
II

Certified that I, Dr.....

Station...... Signature of the candidate

Date

CHECK LIST

I Demand Draft for Rs.1250/- (Rupees One thousand two hundred and fifty only) in case of General category and Rs.900/- (Nine hundred only) for SC/ST category drawn on any Nationalised Bank in favour of the Director, National Institute of Siddha payable at Chennai towards application fee

II Stitch the Self attested Photostat copies of the following documents

1	Evidence for Date of Birth (H.S.C/S.S.L.C certificate/College leaving	Yes /No
	Certificate to be furnished	
2	Transfer Certificate	Yes /No
3	Community Certificate (for OBC /SC / ST).	Yes /No
4	Special category Certificate – if applicable	Yes /No
5	Statement of marks of first appearance (including failed subjects) Final year B.I.M / B.S.M.S Course.	Yes /No
6	Internship certificate.(C.R.R.I)	Yes /No
7	B.I.M/B.S.M.S Degree Certificate/Provisional Certificate issued by the University	Yes /No
8	Medical Registration Certificate	Yes /No

III. Two Conduct Certificates

- a. Self Attested photo copy of the conduct certificate from the Institution last studied.
- b. Original latest conduct certificate obtained from known responsible person of Gazetted rank.
- IV. Hall Tickets for the Entrance Examination 2013-14. (Original & Duplicate)
- V. Self addressed envelope with postage stamp for Rs.36/- affixed for issue of hall ticket (26 cms x 12 cms)

E.E.No.:	
(To be filled in	by the Institute)

M.D.(SIDDHA) ADMISSION 2013-2014 SESSION SCRUTINY FORM (To be filled in by the Candidate as per the entries made in Application form)

Sl.No	Details (SCRUTINY (OFFICE USE ONLY)		
1.	Name in Capital Letter	Dr.							
2.	Mailing Address								
		Contac	t Ph	one No	o. with	ST	D Code	:	
		Mobile	No	. (if an	y)				
	Pin Code:	E-Mail	E-Mail-ID						
3.	Date of Birth	Date		Mont	h	Y	ear		
4.	Nativity (CIRCLE THE	TN Others							
5.	CORRECT NUMBER) Mother Tongue (CIRCLE THE	Tom	1		2 Other	·C			
	CORRECT NUMBER)	Tamil Others 1 2							
6.	Community (CIRCLE THE	Gen	Ol	ВС	SC		ST		
	CORRECT NUMBER)	1	2		3		4		
7.	Date of Completion of CRRI Training	Date	Date Month Year						
8.	Details of Medical Registration with Number					ı			
9.	Whether Service candidate or not	Yes			No				

10. Total marks in final B.I.M / B.S.M.S first appearance.	Obtained	Maximum	No. of Attempts	
11 Name of the University to which affiliated			1	
12. Whether discontinued PG degree course previously. If yes, state the branch and date of discontinuation.				
13. Special Category	YES		NO	
I sincerely affirm that the partition:	rticulars fur	nished above	e are true.	
Date:		CANDIDA	ATE'S SIG	NATURE
(FOR OFF	FICE USE	ONLY)		
Eligibility: 1. El	igible [2. Not	Eligible
Reason (s) for ineligibility :				
Members				
1.				
2.				

SECRETARY

CHAIRMAN

Email id: nischennaisiddha@yahoo.co.in www.nischennai.org

HALL TICKET (Candidate copy)

Entrance Examination No	
Name and Address of the candidate:	Attested passport Size Photograph (Identical to the Photograph affixed in the application)
Dr	Photograph affixed in the application)
	in the application)

Date of Examination: 19.10.2013 Time: 10.00 a.m to 1.00 p.m Venue: Hanger Hall-II.

Madras Institute of Technology, Chrompet, Chennai-44.

Signature of the Candidate

DIRECTOR

INSTRUCTIONS TO CANDIDATES APPEARING FOR THE ENTRANCE EXAMINATION TO POST GRADUATE – M.D (Siddha) DEGREE FOR 2013-14.

- 1. Keep Hall Ticket safely with you and bring it when you come to the Examination Hall. It should be produced on demand.
- 2. Report at the place of examination 30 minutes before the commencement of examination.
- 3. Bring your own blue or black ball point pen to the examination Hall.
- 4. Write Your Entrance Examination Number as given in your Hall ticket in the specified places in the answer sheet.
- 5. Handover the Question paper and Answer sheets to the invigilator before you leave the examination Hall.
- 6. Admission to the Entrance Examination does not confer the right of admission to the course on the candidate if he/she is found ineligible later on.
- 7. Your candidature, if found ineligible, shall be cancelled at any stage.
- 8. Violation of any instruction and adoption of any unfair means in the examination hall will render your answer sheet liable for cancellation, leading to forfeiture of your claim for admission.
- 9. No candidate will be permitted to enter the examination hall 30 minutes after the commencement of Examination.
- 10. No candidate will be allowed to leave the examination hall before 12.30 p.m.
- 11. Valuation is final and request for re-checking, revaluation of answer sheets will not be entertained.
- 12. Mobile phones, Blue tooth or any sort of electronic device shall not be allowed inside the examination hall. If any candidate is found guilty of being in possession of such items, his/her candidature shall be forfeited.



NATIONAL INSTITUTE OF SIDDHA

(Ministry of Health &FW,Dept.,of AYUSH,Govt.of India) TAMBARAM SANATORIUM, CHENNAI -600 047 Tele:044-22381314

Email id: nischennaisiddha@yahoo.co.in <u>www.nischennai.org</u>

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Dr	(Identical to the Photograph affixed in the application)
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