

EE NO:

APPLICATION NUMBER:

**ADMISSION TO
POST GRADUATE DEGREE COURSE
M.D. (SIDDHA)**

APPLICATION FORM

आवेदन पत्र

2014-2015

**NATIONAL INSTITUTE OF SIDDHA,
TAMBARAM SANATORIUM, CHENNAI - 600 047
TAMIL NADU, INDIA**

Ph: 044 - 22411611; Fax: 044 - 22381314

Email: nischennaisiddha@yahoo.co.in

Website: www.nischennai.org

**APPLICATION FORM FOR ADMISSION TO
M.D. (SIDDHA) DEGREE COURSE 2014 –2015**

**NATIONAL INSTITUTE OF SIDDHA,
TAMBARAM SANATORIUM, CHENNAI-600 047.**

Particulars of DD towards application fee

Name of the Bank drawn on :

DD No./Date :

Amount :

Affix passport size
Photo duly
attested by a
Gazetted Officer

1. Name of the candidate (in Block Letters) _____

2. Date of Birth :

3. Mailing Address : Door No: _____

Street: _____

Village / Locality: _____

Taluk / Town: _____

District / City: _____

PIN CODE :

--	--	--	--	--	--

4. a) Contact No. (Mobile & Land line with STD code):

b) E.mail id:

5. Gender (Tick the Box) :

Male

Female

6. Community (Tick the Box) :

(OBC /SC / ST candidates should enclose
attested photocopy of the Community
Certificate issued by competent authority)

Certificate number

:

Gen

OBC

SC

ST

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 :
(Recognized by the Central Council of Indian Medicine) and the University

14. Month and year of passing the final :
B.I.M / B.S.M.S exam :

15. No. of attempts for passing the final year exam :

16. Total marks obtained in final year :

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.
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.....
S/o / D/o / W/o. Thiru
hereby declare that I am not doing any Postgraduate Degree Course
elsewhere.**

**I have not joined the Postgraduate M.D (Siddha) Degree Course and
previously discontinued on my own accord or on any other grounds.**

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 Certificate).	Yes / No
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.	Tamil Nadu Siddha Medical Council 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 or a person of Gazetted rank.

IV. Hall Tickets for the Entrance Examination 2014-15. (Candidate copy & Office copy)

V. Self addressed envelope with postage stamp for Rs.40/- 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 2014-15 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	Contact Nos. Land line with STD Code Mobile No. Email. Id:							
	Pin Code:								
3.	Date of Birth	Date	Month		Year				
4.	Nativity (Circle the Correct Number)	TN			Others				
		1			2				
5.	Mother Tongue (Circle the Correct Number)	Tamil			Others				
		1			2				
6.	Community (Circle the Correct Number)	Gen	OBC	SC	ST				
		1	2	3	4				
7.	Date of Completion of CRR I Training	Date	Month		Year				
8.	Details of Medical Registration (Name of the Council & Number)								
9.	Whether Service candidate or not (Please Tick)	Yes			No				

10.	Total marks in final B.I.M / B.S.M.S first	Obtained	Maximum	No. of Attempts	
11.	Name of the University to which the college affiliated				
12.	Whether discontinued PG degree course previously. If yes, state the branch and date of discontinuation.				
13.	Special Category (Please Tick)	YES	NO		

I sincerely affirm that the particulars furnished above are true.

Station :

Date:

Candidate's Signature

(FOR OFFICE USE ONLY)

Eligibility : 1. Eligible ☐ 2. Not Eligible ☐

Reason (s) for ineligibility :

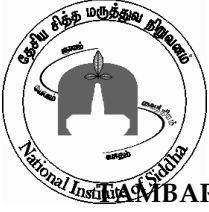
Members

1.

2.

SECRETARY

CHAIRMAN



NATIONAL INSTITUTE OF SIDDHA

राष्ट्रीय सिद्ध संस्थान

Dept. of AYUSH- MINISTRY OF HEALTH & FAMILY WELFARE

आयुष विभाग - स्वास्थ्य एवं परिवार कल्याण मंत्रालय

GOVERNMENT OF INDIA-भारत सरकार

AMBARAM SANATORIUM, CHENNAI -600 047 -ताम्बरम सनटोरियम चेन्नई -600 047

फोन\Tel: 044-22411611

ईमेल: nischennaisiddha@yahoo.co.in

फैक्स\Fax: 22381314

वेब : www.nischennai.org

HALL TICKET (Office Copy)

Entrance Examination No:-----

Name and Address of the candidate:

Dr.

.....

.....

.....

Entrance Examination No.....

Date of Examination: 18.10.14

Time : 10.00 a.m to 1.00 p.m

Venue: HANGAR HALL -II,

Madras Institute of Technology, Chrompet, Chennai-44

Attested passport

Size Photograph

Taken from the same

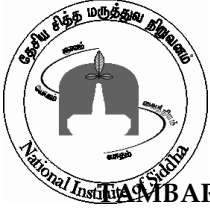
Negative

Signature of the Candidate:

DIRECTOR

INSTRUCTIONS TO CANDIDATES APPEARING FOR THE ENTRANCE EXAMINATION TO POST GRADUATE - M.D(Siddha) DEGREE COURSE FOR 2014-15.

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

राष्ट्रीय सिद्ध संस्थान

Dept of AYUSH- MINISTRY OF HEALTH & FAMILY WELFARE

आयुष विभाग - स्वास्थ्य एवं परिवार कल्याण मंत्रालय

GOVERNMENT OF INDIA-भारत सरकार

AMBARAM SANATORIUM, CHENNAI -600 047 -ताम्बरम सनटोरियम चेन्नई -600 047

फोन\Tel: 044-22411611

ईमेल: nischennaisiddha@yahoo.co.in

फैक्स\Fax: 22381314

वेब : www.nischennai.org

HALL TICKET (Candidate Copy)

Entrance Examination No: -----

Name and Address of the candidate:

Dr.

.....

.....

.....

Entrance Examination No.....

Date of Examination: 18.10.14

Time : 10.00 a.m to 1.00 p.m

Venue: HANGAR HALL –II,

Madras Institute of Technology,Chrompet, Chennai-44

Attested passport

Size Photograph

Taken from the same

Negative

Signature of the Candidate:

DIRECTOR

INSTRUCTIONS TO CANDIDATES APPEARING FOR THE ENTRANCE EXAMINATION TO POST GRADUATE – M.D(Siddha) DEGREE COURSE FOR 2014-15.

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.