



## MMM College of Health Sciences

(A Unit of Madras Medical Mission) (ISO 9001:2008 Certified)

No, 9, Block No. 11, Kannadasan Salai, Mogappair East, Chennai -600037, India

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### APPLICATION FOR ADMISSION – PG COURSES

( To be filled by the candidate in English in his/her hand-writing. Study the prospectus before filling in the application)

Application No : ..... Course Applied:.....

Affix recent passport size photograph only

1. NAME OF THE CANDIDATE:

(in full and in block letters as entered in S.S.C. or equivalent certificate)

2. Date of Birth

3. Age (in years) .....

4. Nationality:..... 5. Religion & Community Name :.....

6. Community : OC  BC  MBC/DNC  SC/ST  Others Specify

7. Sex: Male  Female

8. Physical Condition: Normal / Disabled If disabled ..... Vision  Hearing  Ortho  Others

9. Mother Tongue:..... 10 .Blood Group:.....

11. Identification marks of candidate as given in School/College records : .....

12. Details of Parents/Guardian:

Details	Father/Guardian	Mother
Name		
Qualification		
Occupation		
Address of place of Work		
Phone no		
e-mail ID		
Annual Income from all sources - Father/Guardian/Mother		



**13. Contact Details of Applicant:**

Address for communication					Permanent Address				
City:	Pin Code				City:	Pin Code			
State:					State:				
Telephone Number :					Email Address :				
Mobile Number :					Alternate Email Address:				

**14. Details of College last Studied:**

- a. Name of the College & Address:.....
- b. University to which college is affiliated: .....c. Medium of Instruction: .....
- d. Extra Curricular Activities participated: Sports / NSS / NCC / Others (Specify): .....

**15 Details of Marks Obtained: Average of Total Marks in all Major Subjects:**

	I Year Subject	Marks	Max	II Year Subject	Marks	Max	III Year Subject	Marks	Max
Subject 1									
Subject 2									
Subject 3									
Subject 4									
Subject 5									
Subject 6									
Subject 7									
Subject 8									
Subject 9									
Subject 10									
<b>Total for Major Subjects only</b>									

**Documents to be submitted along with the form:**

Photocopies of Mark statement(s) of 10<sup>th</sup> Standard, Higher Secondary and U.G.Degree, U.G.Degree Certificate If obtained /Course completion certificate, U.G.Provisional Certificate, Transfer Certificate of U.G.Course & Community Certificate for the entire category. Migration certificate from the University last completed. Eligibility Certificate obtained from The Tamil Nadu Dr. M.G.R Medical University for candidates other than The Tamil Nadu Dr. M.G.R Medical University.

**Declaration by the candidate:**

I declare that all the foregoing statements made in this application are true and that the rules of the university and the college will be followed on admission. I accept that any statement made in this application, if found incorrect on scrutiny, will render the application liable for rejection and admission, if granted on basis of such incorrect information, will stand cancelled.

Date:

Place:

Signature of Parent / Guardian

Signature of Applicant

**Candidates please send a D.D. of Rs.850/- along with the duly filled application form in favour of "MMM COLLEGE OF HEALTH SCIENCES", Payable at Chennai towards the cost of application form and prospectus. Which will be sent by post.**