

AMRITA SCHOOL OF MEDICINE
PERSONAL DATA



DM/MCh 2021

Category of Admission: General/NRI/SC/ST/OEC

Roll Number:																				
Aadhar No:																				
Pan No:																				

FILL IN BLOCK LETTERS

Name of Resident																					
Expansion of Initials																					
Male / Female (M/F)												Blood group									
Mother tongue												Nationality									
Age		Date of Birth												Place of birth							
Religion						Caste								SC/ST/OBC/ General							
Language in which you need Mathruvani(Magazine)																					
Permanent address (with State and Pin code)						Address for Communication (with State and Pin code)						Address in which Mathruvani to be sent (with State and Pin code)									
Phone No (with STD Code)						Mobile No		Resident													
								Parent													
Email ID		Resident																			
		Parent																			

Qualification	MBBS	MD/MS
Month & Year of passing		
Name & Address (with Pin code) of college from where passed		
Name & address (with pin code) of University which conferred the Degree		
Name of Medical Council/s where Registered		
Registration Number & Date		

Previous Experience

Name and address of the Institution	From	To	Post Held	Reason for Leaving

Personal data of Parents & Spouse

	Father	Mother	Husband/Wife
Name			
Occupation			
Designation			
If Working Name & Address of the Institution			
Land line No.			
Mobile No			
Email ID			
Approximate annual Income			
Would you like to keep Local Guardian? if so give details			

Declaration by the Resident

I am fully aware that

- I am bound by the terms and conditions applicable for admission to Amrita Vishwa Vidyapeetham and as detailed in the booklet, Rules and Regulations applicable for admission.
- If any information furnished by me is found to be incorrect, admission is liable to be cancelled.
- The fees (including tuition and other fees) now being paid by me are provisional and the University / College may fix a different fee in course of time. If any such revision takes place and demand is made by the Principal, Amrita School of Medicine for payment of the enhanced fee, I shall pay the same within the time limit specified by the Principal
- This Institution is an extension of 'Mata Amritanandamayi Math'. Rules, regulations and the requirements of discipline as envisaged by the Math will have to be scrupulously adhered to.
- If the Principal is satisfied that the Resident has committed a breach of any of these requirements, Principal may at his discretion takes appropriate action including rustication.

Signature of Student

Signature of Parent