

PGM - 2008

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APPLICATION NUMBER

APPLICATION FOR ADMISSION TO POST GRADUATE MEDICAL [DEGREE / DIPLOMA] COURSES, KERALA – 2008

Centre of Examination <i>Put a "✓" mark</i>	TVM		EKM		KKD	
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Put a "✓" mark in the relevant category under which you are applying	GENERAL QUOTA ONLY		SERVICE QUOTA ONLY		GENERAL & SERVICE QUOTA	
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Note: Please read the Prospectus carefully before filling up the Application form.

Please insert one letter /number in a box.

1. Name in CAPITAL Letters, beginning from the left – Initials at the end of name.																	

2. Contact telephone number										3. Date of Birth						(a) Completed Age as on 30.04.2008	
STD Code		Land / Mobile Number								Day		Month		Year			

4. Full postal address of the candidate in capital letters (With Pin Code)	<p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....Pin Code</p>	<p>Please paste a recent photograph of the applicant, with Signature of the applicant, half on the photograph and half on the application form</p>
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5. NATIVITY: Do you satisfy Nativity conditions as per Clause IV (b) of Prospectus.	6. Do you claim Reservation under SC / ST ? [SC/ST Candidates should obtain Community Certificate on page No.4]	7. Do you claim reservation under * SEBC	8. Do you claim reservation under *Ex-servicemen quota [See instruction No. 8 on page 6]
Write YES or NO.	[a] If YES, Write SC / ST or else write NA	Write YES / NO	Write YES / NO
* Obtain Nativity Certificate on page number 3.	[b] If SC or ST, write the name of the Community below:	*SEBC Candidates should obtain Income and Community certificates given on page no. 5	* Attach Certificate from Zilla Sainik Welfare officer

8 (a) If answer to item 8 is 'YES', put a "✓" mark against the respective category given below.			
(i) Ex-serviceman		(ii) Dependant of Jawan killed in action	(iii) Dependant of Ex-serviceman
9. Do You claim reservation under "Persons with Disabilities" {PWD} {Write YES or NO, If YES, see Clause VI(d)}			

10. (a) Total marks obtained (For all years together)	Marks secured		Maximum Marks	
(b) Register No., Month & year of passing.				
(c) Name of the University. [See Clause XI (D)g of Prospectus]				
11. Date of completion of Compulsory Rotating Resident Internship (C.R.R.I). Attach copy of the C.R.R.I Certificate. [See instruction No.10, on page 6]				
12. T. C. Medical Council Registration Number, if already registered. [See instruction No.11, on page 6]				
13. Details of Application Fee remitted.	D.D Number	Date	Name of Bank	

ITEMS 14 TO 19 ARE APPLICABLE ONLY TO **SERVICE CANDIDATES**.

14. If you claim Reservation under Service Quota please put a "✓" mark against the Quota (s) under which admission is sought for.									
1	Lecturer Quota / MES Quota	LRQ / MEQ		7	Difficult Rural Area Quota	DRQ			
2	Insurance Medical Service Quota	IMQ		8	Leprosy Service Quota	LSQ			
3	Factories & Boilers Quota	FBQ		9	Tuberculosis Service Quota	TBQ			
4	Municipal Common Service Quota	MUQ		10	First Referral Unit Quota	FRQ			
5	Seniority in Service Quota	SSQ		11	Family welfare Quota	FWQ			
6	Rural Service Quota	RSQ		12	Prison Service Quota	PRQ			
15. Department to which the candidate is employed.									
16. Total length of service as on 01-01-2008. (excluding periods of Leave Without Allowance & unauthorized absence, if any)				Year(s)		Month(s)		Day(s)	
17. Whether probation is declared? [Write YES / NO] If the answer is YES, write the date of declaration of probation.									
18. Have you availed the benefit of reservation under any of the Service Quota previously for undergoing P. G Course? If so, furnish details.									
19. Have you availed the benefit of Lecturer Trainee Scheme previously for undergoing P. G. Course in any speciality in Medical Education Service? If so, furnish details.									

20. DECLARATION
(To be filled by all candidates)

I, hereby declare that, all the information furnished by me in the Application form are correct to the best of my knowledge and belief and that, I have read and hereby accept all the conditions of admission to the Post Graduate Medical Degree/Diploma Courses – 2008, as contained in the Prospectus and I agree to join the course to which selected and College to which allotted and shall not engage myself in private practice during the period of the course.

Place:

Date:

Signature of the Applicant

I. CERTIFICATE TO PROVE NATIVITY

As per Clause IV (b) and VIII (c) (viii) of the Prospectus

[a] Certificate of Birth / Residence

(To be signed by a Village officer in Kerala State)

CERTIFIED that, Shri/Smt is an Applicant for admission to the Post Graduate Medical [Degree/Diploma] Courses – 2008 and* he/she / or his father /mother, Sri/Smt. residing at House, Village, District, was born in Kerala.

***OR**

CERTIFIED that, Shri/Smt is an Applicant for admission to the Post Graduate Medical [Degree/Diploma] Courses – 2008, has been a resident of Kerala State for a period **not less than 8 years.**

Signature of the Village Officer :

Name :

Place:

Taluk :

Date:

District :

OR

[b]. Certificate regarding Under Graduate Course (M .B.B.S) studies in Medical Colleges in Kerala.

(To be obtained from the Principal of the Medical College in Kerala where the candidate had undergone his/her M.B.B.S. Course)

CERTIFIED that, Shri/Smt, an Applicant for admission to the Post Graduate Medical [Degree/Diploma] Courses – 2008, was a student of M.B.B.S. Course in this Medical College,, Kerala during the period from to, and that, he/she has passed his/her M.B.B.S. Examination in the year

Signature of the Principal:

Name:

Place:

Name of the Institution:

Date:

(Office Seal)

* Strike out which is not applicable.

II. COMMUNITY CERTIFICATE
(For Scheduled Caste & Scheduled Tribe Candidates only)

As per Clause VI (c) (i) and VIII (c) (vii) of the Prospectus.

1. This is to certify that Shri/Smt./Kumari , Son/Daughter of
..... of House
..... village/Town Taluk
..... District of Kerala State belongs to the Caste/*Tribe which
is recognized as a Scheduled Caste/Scheduled Tribe under:-

The Constitution Amendment (Scheduled Castes) Order, 1950
The Constitution Amendment (Scheduled Tribes) Order, 1950
(as amended by the Scheduled Castes and Scheduled Tribes Orders (Amendment) Act, 1976)

Certified that Shri/Smt./Kumari (name of person) Son/daughter of
..... of House
..... Village/ Town Taluk
..... District is a member of Malai Araya Christian family converted to Christianity from
Hindu Malai Arayan Community, which is included in the list of Scheduled Tribes.

2. Shri/Smt./Kumari and his/her* family ordinarily
reside(s) in Village/Town, of District
of Kerala State.

Signature of Tahsildar :

Place :

Name :

Date :

(Seal of Office)

.....
* Please delete the words/clause which are not applicable.

- Note:
1. The term ordinarily resides used here will have the same meaning as in Section 20 of the Representation of the Peoples Act, 1950.
 2. In case of X'ian converts from S.C who have subsequently embraced Hinduism should get the following certificate recorded by the 'Tahsildar' below the community Certificate. "The certificate is issued after observing the guidelines issued in Government Circular no. 18421/E2/87/SC/ST/DD. Dated 15-12-1987"
 3. Issue of Community Certificate to Scheduled Caste / Scheduled Tribe will be regulated by Act II of the Kerala (Scheduled Caste & Scheduled Tribe) Regulation of Issue of Community Certificate Act 1996.
 4. Certificate to persons belonging to Malai Arayan Commuity (S.T) converted to Christianity should be in this form.

III. CERTIFICATES FOR SOCIALLY AND EDUCATIONALLY BACKWARD CLASSES

(See Clauses VII (j) and IX (a) of the Prospectus)

- Note:** (i) Candidates claiming relaxation in marks for the P.G. Medical Entrance Examination, applicable to SEBC, should furnish both the Community and Income Certificates given below in support of the claim.
 (ii) Son/daughter of inter- caste married couple, claiming SEBC reservation need produce only an 'inter-caste marriage certificate' from the Tahsildar concerned.

1. COMMUNITY CERTIFICATE

Note: In case, relaxation in marks for the P. G. Medical Entrance Examination-2008, is claimed as a member of 'Latin catholic other than Anglo Indian', a Certificate from the Village officer to the effect that, the candidate belongs to *Latin catholic Other than Anglo Indian* or Latin Christian *Other than Anglo Indian* should be obtained in the COMMUNITY CERTIFICATE.

CERTIFIED that, Shri / Smt / Kum., son / daughter of Shri / Smt , residing at House, Village, Taluk, District of Kerala State, belongs to caste, religion, which is included as Socially and Educationally Backward Class as per G.O.(P) 208/66, dated: 02-05-1966 and subsequent amendments, thereof.

Signature of the Village Officer:
 Name:
 Designation and Address:

Place:
 Date :

(Office Seal)

2. INCOME CERTIFICATE

നമ്പർ: വില്ലേജ് ഓഫീസ് :
 തീയതി :

..... ജില്ലയിൽ താലൂക്കിൽ വില്ലേജിൽ വീട്ടിൽ ശ്രീ /ശ്രീമതി തീയതി സമർപ്പിച്ച അപേക്ഷയിൽ* ന് വേണ്ടി ഒരു വരുമാന സർട്ടിഫിക്കറ്റ് ആവശ്യപ്പെട്ടിരുന്നു. ടിയാന്റെ വാർഷിക കുടുംബ വരുമാനം രൂപയാണെന്ന് പ്രസ്താവിച്ചിട്ടുണ്ട്. എന്റെ അന്വേഷണത്തിൽ ബോധ്യപ്പെട്ടതനുസരിച്ച് ടിയാന്റെ വാർഷിക കുടുംബ വരുമാനം താഴെ കാണിച്ചിരിക്കുന്ന പ്രകാരമാണെന്ന് ഞാൻ ഇതിനാൽ സാക്ഷ്യപ്പെടുത്തുന്നു. കുടുംബത്തിലെ അംഗസംഖ്യ..... ആണ്. അതിൽ ജോലിയുള്ളവർഉം പഠിക്കുന്നവർഉം ജോലി ഇല്ലാത്തവർഉം ആണ്.

ആദായ മാർഗ്ഗങ്ങൾ	ഭൂമിയിൽ നിന്നുള്ള ആദായം	ശമ്പളം/പെൻഷൻ (കുടുംബ പെൻഷൻ ഒഴികെ) **	കച്ചവടം	കുലിവേല	വിദേശത്ത് ജോലിയുള്ളവരുടെ വരുമാനം	വാടക	മറ്റിനം	ആകെ
അംഗങ്ങൾ അച്ഛൻ അമ്മ മക്കൾ								

മൊത്തത്തിലുള്ള തുക അക്കത്തിൽ :
 അക്ഷരത്തിൽ :

മൂന്നു കുട്ടികളിൽ കുടുതലുള്ളവരുടെ കാര്യത്തിൽ കുടുതലുള്ള കുട്ടികൾക്ക് :
 കുറവു ചെയ്യേണ്ട തുക

ബാക്കി തുക: അക്കത്തിൽ :
 അക്ഷരത്തിൽ :

ഒപ്പ് :
 ഓഫീസ് മുദ്ര പേരും ഉദ്യോഗപ്പേരും :

* ആരുടെ ആവശ്യത്തിനാണ് വ്യക്തമാക്കണം
 ** സ്ഥിര ശമ്പളക്കാരായ ഉദ്യോഗസ്ഥരുടെ കാര്യത്തിൽ അടിസ്ഥാന ശമ്പളത്തോടൊപ്പം നിലവിലുള്ള ഡി.എ. കുടി കണക്കിലെടുത്താകണം വാർഷിക കുടുംബവരുമാനം കണക്കാക്കേണ്ടത്.

INSTRUCTIONS TO FILL IN THE APPLICATION FORM

1. The Application Form is common for all candidates applying under various Quotas, including Service candidates. Please read the instructions carefully before filling up the Application Form.
2. The examination will be held at Thiruvananthapuram (TVM), Ernakulam (EKM) and Kozhikode (KKD).
3. Please affix your recent passport size **photograph** on page 1 of the application form and sign over it with half the signature on the photograph and half outside it. Also affix a similar photograph on the Computer Data Sheet, on page No.7 (Do not sign over this photograph)
4. **COPY OF CERTIFICATE TO PROVE DATE OF BIRTH:** Self attested copy of School record or any relevant document (Birth certificate/Copy of passport) should be attached by all candidates. {As per Clauses IV (c) and VIII [c] (iii) of the Prospectus}.
5. **CERTIFICATE TO PROVE NATIVITY:** This is to be obtained by all candidates applying under General Merit Quota Seats in the format 1(a)/ 1 (b) given on page no. 3 of the Application form itself. {As per Clauses IV (b) and VIII [c] (viii) of the Prospectus }
NOTE: Service candidates applying only under Service Quota seats need not obtain this certificate. But, those Service candidates applying under General Merit Quota seats also, have to obtain the Nativity Certificate on page number 3, of the application form.
6. **COMMUNITY CERTIFICATE** should be obtained on page no. 4 of the Application form by General and Service candidates belonging to SC/ST Communities. {As per Clause VI [c] (i) and Clause VIII [c] (vii) of the Prospectus}.
7. **RESERVATION UNDER SEBC:** Candidates belonging to Socially and Educationally Backward Classes (SEBC) having annual family income not exceeding Rs. 2, 50,000/- are eligible for relaxation in marks in the Entrance Examination. They should obtain Community and Income Certificate from the Village officer concerned in page number 5 of the Application form itself. {As per Clauses VII (j) and VIII (c) and IX (a) of the Prospectus.
8. **EX-SERVICEMEN QUOTA:** General Candidates claiming reservation under this Quota should indicate the relevant category by putting a "✓" mark in the corresponding box, under item 8 (a) of the Application form. Such candidates should also attach, a copy of the Certificate to this effect, obtained (not later than six months as on the date of submission of Application form) from the Zillah Sainik Welfare Officer concerned, along with the application form. {As per Clauses VI [b] and VIII [c] [v] of the Prospectus }.
9. **RESERVATION UNDER PERSONS WITH DISABILITIES (PWD):** Candidates applying under this quota should attach attested copy of the "Certificate of Disability" issued by the District Medical Board, certifying the degree of percentage of disability, issued not earlier than 3 months prior to the date of submission of Application form. {As per Clauses VI (d) & VIII [c] (v) of the Prospectus}.
10. **C.R.R.I CERTIFICATE:** (Item No. 11, of the Application form.) {As per Clauses IV [a] and VIII [c] [ii] of the Prospectus}
(a) Candidates should write the date of completion of the C.R.R.I. and should attach the attested copy of the Internship Certificate.
(b) Those who have not received the C.R.R.I. Certificate should furnish a Certificate from the Principal concerned that he/she has completed the internship as on 31-03-2008.
11. **T. C. MEDICAL COUNCIL REGISTRATION CERTIFICATE** (Item no.12, of the Application Form)
Candidates already having Registration should write the registration Number and date. Those who have not registered may leave the column blank. (Also see Clauses IV (a) and VIII (c) (i) of the Prospectus.
12. Demand Draft for the amount of application fees as given below, drawn on a Nationalized Bank, in favour of the Commissioner for Entrance Examinations, payable at Thiruvananthapuram. **[Rs.800/- General Quota Only, Rs.800/- Service Quota Only]**. SC/ST candidates and those eligible for SC/ST benefits as per G.O (MS) No. 25/05/SCSTDD, dated 22-06-2005, have to pay only Rs.400/- [i.e., either General or Service] as per Clause VIII (a). Service quota candidates applying under General Merit quota also should pay extra Rs.800/- (Item No. 13, of the Application Form)
13. Application duly filled in together with the Demand Draft and all other documents specified as per Clause VIII (c) of the Prospectus should reach the **Commissioner for Entrance Examinations, Housing Board Buildings, Vth Floor, Santhi Nagar, Thiruvananthapuram- 695 001**, on or before 5 p.m on 05-01-2008.

NOTE: Service Candidates should apply to the Commissioner for Entrance Examinations, as mentioned above. They are not required to submit any Service related documents along with the application submitted to the Commissioner. **However, they should also forward a copy of the Application form** (with copies of all documents mentioned above), **along with** (1) **Authenticated document** showing the Service details of the candidates obtained from the Accountant General. (2) **Declaration** to the effect that, they have not availed the benefit of Reservation under any of the Service Quota previously for undergoing the P G Course **and Annexure I** (**Page No. 9 of the Application form**) to the Controlling Officer concerned (**DME / DHS / DIMS / Director of Factories & boilers / Director of Municipal Services**) so as to reach them before the last date and time notified.

For Office use only	Remarks

PGM-2008

APPLICATION FOR ADMISSION TO POST GRADUATE MEDICAL [DEGREE / DIPLOMA] COURSES, KERALA – 2008

COMPUTER DATA SHEET

Roll Number

[To be filled and returned with the Application Form]

APPLICATION NUMBER (Will be given by the Office)	Write below, your complete mailing address, including your name in BLOCK letters.								Paste, (do not staple) a recent passport size photograph <i>Do not sign over the photograph</i>													
 Pin code																					
Write your Land/Mobile Phone number	STD Code				Land / Mobile number																	

Note : Read the instructions given below for correctly filling up the data sheet completely. Please insert one letter / number in a box.

Boxes:

- 1 – 23 : Write your name beginning from Box 1 and your initial(s) at the end of your name, leaving one box blank after name.
- 24 – 31 : Write your date of birth.
- 32 – 33 : Write your age in completed years as on 30-04-2008
- 34 – 41 : Write the TOTAL marks secured and MAXIMUM marks (For all years together) of the M.B.B.S Examination.
- 42 – 43 : If you claim reservation under SC/ST Communities, write SC or ST; if under SEBC, write SB or else write GM (General Merit).
- 44 – 45 : Write **EX**, if Ex-service man, **DJ**, if Dependant of jawan killed in action, write **DE**, if dependant of Ex-service man or else write **NA**
- 46 : Write **YES**, if you claim reservation under ‘Persons with Disabilities’ or else write **NA**
- 47 – 49 : Write the code of the Centre of Examination chosen as **TVM** for Thiruvananthapuram, **EKM** for Ernakulam or **KKD** for Kozhikode.
- 50 – 52 : Write GEN if applied under General Merit Quota only, SER, if applied under Service Quota only and ‘SAG’ if applied under both Service and General Merit Quotas.
- 53 – 61 : Write the code of the relevant Service Quota(s) applicable: Lecturer Quota (**LRQ**), Difficult rural area Quota (**DRQ**), Rural Service Quota (**RSQ**), Seniority in Service Quota (**SSQ**), First Referral Unit Quota (**FRQ**), Leprosy Service Quota (**LSQ**), Tuberculosis Quota (**TBQ**), Municipal Common Service Quota (**MUQ**), Insurance Medical Service Quota (**IMQ**), Factories & Boilers Quota (**FBQ**), Family Welfare Quota (**FWQ**), and Prison Service Quota (**PRQ**)

Name in CAPITAL Letters – Initials at the end of the Name																						
01	02	03	04	05	06	07	08	09	10	11	12	13	14	15	16	17	18	19	20	21	22	23

Date of Birth							
Day		Month		Year			
24	25	26	27	28	29	30	31

Completed Age on 30-4-08	
32	33

Marks of MBBS Examination							
Marks Secured				Maximum Marks			
34	35	36	37	38	39	40	41

Community reservation	
SC/ST/SB/GM	
42	43

Ex-Servicemen Quota	Do you claim reservation under PWD	Centre of Exam chosen			Quota			Service Code			Service Code			Service Code			
EX/DJ/DE/NA	YES /NA	TVM	EKM	KKD	GEN	SER	SAG	(a)			(b)			(c)			
44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61

DECLARATION

(To be filled by all candidates)

Certified that the entries made in the Computer Data Sheet tally with the corresponding entries in the Main Application Form and I have filled all items in the Main Application form and Computer Data Sheet.

Place:

Date:

Signature of the Applicant

**SEE ANNEXURE I.
FOR SERVICE CANDIDATES
ON PAGE No.9**

ANNEXURE I

DETAILS TO BE FURNISHED BY THE HEAD OF THE DEPARTMENT

(Director of Medical Education / Health Services/Insurance Medical Services/Factories & Boilers / Municipal Services)

1. Name of the Applicant with designation			
2. Kerala Public Service Commission Advice number and date [<i>If there are more than one candidates in the advice list, quote the rank number of the candidate in the advice list.</i>]			
3. Name of the Quota under which admission is sought.			
4. Rank assigned in the above Quota [<i>For Service Candidates only</i>]			
5. Total length of service in the category under which admission is sought. (As on 01-01-2008) [<i>Period of Leave Without allowance/unauthorised absence, if any, should be excluded</i>]	Year(s)	Month(s)	Day(s)
6. Date of declaration of probation of the applicant. [<i>If declared, enclose copy of the order</i>]			
7. Whether any disciplinary action is pending against the applicant? [<i>If so, append details.</i>]			
8. Whether the applicant has availed the benefit of reservation for undergoing P.G. Medical Course under any speciality earlier? If so, give details. { <i>See Clause VIII [d] for details</i> }			

The particulars furnished above have been verified and found correct.

Signature of the Head of the Department:

Name :

Designation:

Place:

Date : (Office seal)

NOTE: THIS ANNEXURE NEED NOT BE SENT TO THE COMMISSIONER FOR ENTRANCE EXAMINATIONS, ALONG WITH THE ORIGINAL APPLICATION.

THIS HAS TO BE ATTACHED ALONG WITH THE COPY OF THE APPLICATION FORM SENT TO THE CONTROLLING OFFICER CONCERNED BY ALL SERVICE CANDIDATES.