

## APPLICATION FORM

### **How to fill the application form:**

**Candidates are requested to go through the Prospectus before filling the application form.**

*Candidates are instructed to download the forms for UG/PG course as applicable.*

1. Item (2) write the name of the institution as seen in the prospectus
2. Item ( 1,4,5,7,8,9,10) make entries as shown in the S.S.L C book
3. Item No.14 – all the entries of the relevant columns should be made.
4. Filled in admission card should be sent and along with application, if the course selected has an entrance test by the University.
5. On the top of the envelope write the following – as the case may be- Name of the courses and subjects, whether NRI, Entrance Test, course opted for, reservation status etc.
6. Recent passport size photographs self attested by the candidate should be pasted. One on the application form and other on the admission card (if applicable).
7. Registration fee: Registration Fees of Rs.500/- to be paid along with the application form (Rs. 250/- only for SC/ST candidates). Those who seek admission to NRI quota should remit additional fee of Rs. 750/-. All fee payment should be through **State Bank Collect** link provided in the web site [www.sme.edu.in](http://www.sme.edu.in) or [www.cpas.ac.in](http://www.cpas.ac.in). The fee shall be paid using Credit/Debit card or Net Banking or at SBI with the challan generated from the online transaction. The receipt should be attached with the application form.
8. Item No.22 (for sponsored candidates) need to be filled in by applicable candidates only.
9. **Checklist** of documents enclosed:
  - i) Duly completed application form with photograph self attested
  - ii) Online Payment receipt/challan of registration fee.
  - iii) Two self addressed stamped envelope of size 24 cm 12 cm.
  - iv) Self attested copies of marklists of the qualifying and other exams.
  - v) Self attested copies of pass certificate/certificates,/Provisional certificates of the qualifying exams.
  - vi) Self attested copy of TC
  - vii) Self attested copies of certificates to prove claims based on reservation (caste), Children of ex-service personnel, etc.
  - viii) Self attested copies of relevant page of SSLC to prove age.

**Use pen having either pure black or pure blue ink only to fill the application form**

### **ix) Abbreviations:**

**ET** - Ezhava/Thiyya; **OBH** – Other Backward Hindu; **SC** – Scheduled Caste; **ST** - Scheduled Tribe; **MU** – Muslim; **AILC** - Anglo Indian/Latin Catholic; **OBX** - Other Backward Christian; **VK** - Viswakarma and related communities; **DE** - Dheevara and related communities; **KS** - Kusavan and related communities; **KU** – Kudumbi; **RW** - Regional Weightage; **EX** - Ex-Servicemen quota; **PH** - Physically Handicapped; **DP** - Diploma Holder

**Application to be sent to :**

**The Joint Director, School of Medical Education, Gandhinagar, Kottayam - 686008**

## CENTRE FOR PROFESSIONAL AND ADVANCED STUDIES

(Established by the Government of Kerala)  
(Previously run by Mahatma Gandhi University)

**Head Office:** School of Medical Education,  
Gandhinagar, Kottayam, Kerala Pin: 686008

### Application Form for Admission to PG Programmes

2018-19

**Photograph**  
(Self  
attested by  
the candidate  
over the  
photograph)

NOTE: MAKE ENTRIES IN CAPITAL LETTERS, TICK (√) THE RELEVANT ENTRIES

1. Name of the Applicant													
2. Name of the Institution	SCHOOL OF MEDICAL EDUCATION												
3. Course/Courses opted for PG	Name of Course												
	1.						3.						
	2.						4.						
4. Sex	M	F											
5. Date of Birth	Date			Month			Year					Age	
6. Place of Residence							Panchayat/ Municipality						
	Taluk				Dist.				State				
7. Nationality													
8. Name of Father							Name of Mother						
9. Name of Guardian							Relationship						
10. Seat Category	General category						NRI category						
11. Religion							Caste						
12. Reservation Category as applicable**	ET	SC	ST	MU	OBH	OBX	AILC	VK					
	DE	KS	KU	EX	PH	RW	DP						

\*\*Refer prospectus for details of abbreviations.

13 Permanent Address						Address for Communication					
Dist.						Dist.					
Pincode						Pincode					
Mobile No. 1.						Tel. No./Land No.					
2.											
E-mail:											
14. Details of the Qualifying Examinations (to be supported by copies of mark lists and certificates)											
Exam	University / Board	Reg. No.	Year / Month	Subject	Max. Marks	Marks/ Grade Secured	% of Marks	Class	No. of chances		
i) Graduation 3 year course				English							
				2 <sup>nd</sup> Language .....							
				Main Subject/ Optionals							
				Subsidiaries							
				1.							
				2.							
				Total for Main & Sub							
				Grand Total							

Exam	University /Board	Reg. No.	Year / Month	Semester	Max marks/ Grades	Secured marks/ Grades	SGPA	Class	No. of Chances		
ii) Grading system				1							
				2							
				3							
				4							
				5							
				6							
				7							
				8							
				CGPA							
Exam	University /Board	Reg. No.	Year / Month	Subject	Max Marks	Marks Secured	% of Marks	Class	No. of Chances		
iii) Four year course				I year							
				II year							
				III year							
				IV year							
				Total							
iv) Name & Address of the Institution where the applicant studied:				Whether approved by – Please (√)							
				AICTE		PCI		INC		KNC	
v) Kerala Nursing/Pharmacy Council Reg.No & Date:											
Regn. No.				Date:			State:				
vi) GATE/GPAT Score					Year of qualifying						

Exam	University /Board	Reg. No.	Year / Month	Subject	Max marks /Grades	Secured marks/Grades	% of marks	Class	No of chances
vii) Post Graduation									
viii) Others									

## 15. Experience

Designation	Institution	From-To	Years	Regn. No.

## 16. Registration Fee Particulars

SB Collect ref No /Challan No.		Amount Rs.		Date of Issue	
Issuing Bank			Branch		

## 17. Achievement in Sports and Games

Item	Position	Level-University/State/Nation	Year	Organised By

## 18. Participation in NSS/NCC

Certificate	No	Name of Course & College	Year	Reg.No & Year of Exam	Other Information

## 19. Whether Orthopaedically handicapped

If yes, give details

## 20. Annual Income of the family Rs.

**Declaration**

I do hereby declare that the statements given in the application are true to the best of my knowledge and belief. The original certificates shall be produced during the time of interview or admission. I know that if the information given is found to be fraudulent, I shall be liable for criminal prosecution. I have gone through the instructions in the Prospectus and I agree to abide by the rules and regulations and conditions prescribed by the CPAS for admission to the course. I agree to be transferred to a different centre of study if the CPAS decides to do so. I agree to pay the prescribed fees stipulated by the CPAS.

Name &amp; Signature of Applicant

Name & Signature of  
Parent/Guardian

.....

.....

Place .....

Date .....

## 21. Self attested copies of all supporting documents detailed in the application form Sl. No. 9: check list

**22. To be filled by the *sponsored candidates* only.** Name and category of the sponsoring authority.

Name:					
Category	Company	University	Educational Institution	Govt. Dept	Govt autonomous organization

### **Certificate**

Certified that Mr/Mrs..... Is holding post of.....in this institution from .....onwards till date and that he/she continues service/research has an experience of .....years ..... months as on. This institution has the privilege to sponsor Mr/Mrs..... to be sponsored candidate for seeking admission to M Pharm degree course in .....and also inform that the candidate will not be withdrawn from the course of study by this institution.

Signature of the sponsoring authority:

Name

Place:

Date:

Designation & Address:

Seal