

Application No.

**Sri Dharmasthala Manjunatheshwara Colleges of Ayurveda
Bangalore / Hassan / Udupi, Karnataka**

(Affiliated to Rajiv Gandhi University of Health Sciences, Karnataka, Bangalore)
Managed by: Sri Dharmasthala Manjunatheshwara Educational Society (R), Ujire-574240, DK, Karnataka



**APPLICATION FOR ADMISSION TO AYURVEDACHARYA (B.A.M.S.) DEGREE
COURSE FOR THE ACADEMIC YEAR 2019-20**

Please email filled application to: ayuugadmission19@sdmesociety.in

Fee Rs. 500/- may be paid Online: NEFT Payment to Principal, SDM College of Ayurveda,
Hassan, Bank: Vijaya Bank (now Bank of Baroda), Branch: SDM Ayurvedic College,
Hassan, IFSC: VIJB0001425, A/c No: 142500301000081. By DD: Payable at Hassan

Order of Preferred College: Bangalore Hassan Udupi (E.g. Bangalore Hassan Udupi)

1	Name of the applicant in full (BLOCK LETTERS) as in SSLC Marks Card / Birth Certificate																										
2.	Father's Name in full (BLOCK LETTERS)																										
3.	Mother's Name in full (BLOCK LETTERS)																										
4.	Sex: Male <input type="checkbox"/> Female <input type="checkbox"/>																										
5.	Date of birth as per School records & age	Age																									
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6.	Permanent address with PIN code Door No / Lane / Street City / Village Taluk District :	State: <input type="text"/>																									
		PIN: <input type="text"/>																									
7.	Mobile Number – Parent	Student Mobile																									
	<input type="text"/>	<input type="text"/>																									
8.	Email (Parent)	Email (Student)																									
	<input type="text"/>	<input type="text"/>																									
9.	Details of Pre-university (PUC) examinations passed																										
	Name of qualifying Examination <input type="text"/>	Reg. No. <input type="text"/>																									
	Month <input type="text"/>	Year <input type="text"/>																									
	Name of the College studied: <input type="text"/>																										
	Board to which it is affiliated: <input type="text"/>																										
	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Sl</th> <th>Subject</th> <th>Max. Marks</th> <th>Marks obtained</th> <th>%</th> </tr> </thead> <tbody> <tr> <td>1.</td> <td>Physics</td> <td></td> <td></td> <td></td> </tr> <tr> <td>2.</td> <td>Chemistry</td> <td></td> <td></td> <td></td> </tr> <tr> <td>3.</td> <td>Biology</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>Total</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>		Sl	Subject	Max. Marks	Marks obtained	%	1.	Physics				2.	Chemistry				3.	Biology					Total			
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3.	Biology																										
	Total																										
10.	National Eligibility cum Entrance Test (NEET) Score Details																										
	Reg. No.	Rank	Mark																								
	<input type="text"/>	<input type="text"/>	<input type="text"/>																								
		Percentile	<input type="text"/>																								

11. **Nationality** : Indian Other , Give details:

12. **Place of Birth:** Village/Town/City

Taluk _____ District _____

State _____ PIN:

13. **Religion & Caste**

Religion:

If belonging to any one of the categories, the same is to be indicated by mark

Caste:

(i) SC (ii) ST (iii) GM (iv) Cat-I

(v) Cat-II (A)/(B) (vi) Cat-III (A)/(B) (vii) Other

14. **Mother Tongue**

Annual Income of Parent

Occupation of the Parent

15. **Source of information regarding the SDM Ayurveda Colleges** : Please tick mark

Self College Website Alumni Practitioners Govt. agencies Embassy

Other if any specify Recommended by

16. **Achievements if any (District / State / National level)**

1. Curriculum

2. Co-Curriculum

3. Extra - Curricular (Specify any) a. Sports

b. Fine arts

17. **Goal you want to achieve after graduation**

18. **Documents to be emailed to ayugadmission19@sdmesociety.in** (Please tick)

i. **NEET Marks Sheet**

iv. **Caste Certificate**

ii. **SSLC / Xth Marks Card / Birth Certificate**

v. **Income Certificate**

iii. **Pre University / XII Std Marks Card**

vi. **Copy of Aadhar Card / Nationality Certificate / Passport**

DECLARATION BY THE APPLICANT & PARENT

We hereby declare that the above said information is true to best of our knowledge.

Place:

Date:

Signature of the Applicant

Signature of the Parent

For Office Use