

Application No.

**Sri Dharmasthala Manjunatheshwara Colleges of Ayurveda
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 **MD/MS AYURVEDA DEGREE COURSE**
FOR THE ACADEMIC YEAR 2019-20 UNDER MANAGEMENT QUOTA

Affix your recent
passport size
photograph

Please email filled application to: ayupgadmission19@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: Hassan Udupi (E.g. 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. **Gender:** Male Female

5. **Date of birth** as per School records (DD/MM/YYYY) Age

6. **Permanent address with PIN code**

Door No / Lane / Street

City / Village

Taluk

District :

State:

PIN:

7. **Mobile Number – Parent**

Student Mobile

8. **Email id (Parent)**

Email id (Student)

9. **Name of the College & University from which Applicant passed Ayurvedic Degree course**

Month & Year of Passing (MM / YYYY)

Reg. No

Date of completion of Internship (DD / MM / YYYY)

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

11. **Religion:**

Caste:

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

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

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

12. **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

13. All India Ayush Postgraduate Entrance Test (AIAPGET) Score Details

Reg. No.	Rank	Mark	Percentile

14. Subject of specialization the applicant desires to undertake

Sl.	Specialties	Available at		Preferred Order	
		Hassan	Udupi	E.g.	Your choice
1	MD (Ay) - Ayurveda Samhita & Siddhant	✓	✓	9	
2	MD (Ay) - Rachana Sharira	✓	✓	15	
3	MD (Ay) - Kriya Sharira	✓	-	13	
4	MD (Ay) - Dravyaguna Vigyana	✓	✓	14	
5	MD (Ay) - Rasa Shastra & Bhaishajya Kalpana	✓	✓	11	
6	MD (Ay) - Roga Nidana & Vikruti Vigyana	✓	✓	12	
7	MD (Ay) - Agada Tantra	✓	✓	10	
8	MD (Ay) - Swasthavritta	✓	✓	8	
9	MD (Ay) - Kaumarabhritya - Balaroga	✓	✓	2	
10	MD (Ay) - Kayachikitsa	✓	✓	1	
11	MD (Ay) - Mano Vigyana & Manasa Roga	✓	✓	7	
12	MD (Ay) - Panchakarma	✓	✓	6	
13	MS (Ay) - Prasuti Tantra & Stri Roga	✓	✓	3	
14	MS (Ay) - Shalya Tantra	✓	✓	4	
15	MS (Ay) - Shalakya Tantra	✓	-	5	

15. Achievements if any (District / State / National level)

1. Curriculum

2. Co-Curriculum

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

b. Fine arts

16. Goal you want to achieve after Postgraduation**17. Documents to be emailed to ayupgadmision19@sdmesociety.in (Please tick)**

i. AIAPGET Marks Sheet <input type="checkbox"/>	ii. BAMS Degree Certificate <input type="checkbox"/>
iii. First to Final Year BAMS Marks Card <input type="checkbox"/>	iv. Transfer Certificate <input type="checkbox"/>
v. Internship Completion Certificate <input type="checkbox"/>	vi. Date of Birth Certificate (SSLC / 10 th marks card) <input type="checkbox"/>
vii. Attempt Certificate <input type="checkbox"/>	viii. Conduct Certificate <input type="checkbox"/>
viii. Eligibility Certificate of the University <input type="checkbox"/>	ix. Registration Certificate of the Board / Council <input type="checkbox"/>
x. Migration Certificate <input type="checkbox"/>	

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