

Registration No.	
(for Office use only)	

TAMIL NADU VETERINARY AND ANIMAL SCIENCES UNIVERSITY CHENNAI - 600 051, TAMIL NADU, INDIA

APPLICATION FOR ADMISSION TO BVSc & AH AND BTech (Food Technology) DEGREE PROGRAMMES UNDER FOREIGN NATIONAL CATEGORY 2017-18

(Read the guidelines for admission under Foreign National category before filling up the application form)

Degree Programm	ne Applied for:				Affix (do not staple)	
(Separate application Programme along wi	3.5 x 4.5 cm size recently taken Colour Photograph					
	Bank Draft No.	Date	Amount	Issuing Bank	and sign across without disfiguring	
Registration fee:			US \$ 100		the face	
 Name of the Ca Address for Corr 	ndidate (as in Mark s	sheet)				
		_				
	Phone N	No. (with Co	ountry Code) :		<u>.</u>	
	Mobile e-mail :	•				
3. Gender:	Male Female	е	Day	Month	Year	
4. Date of Birth (enclose proof)		:				
5. Father's Name		:				
6. Mother's Name		:				

	me of the amination	Register No.	Name a address o Schoo	of the Bo		ne of the oard / iversity	Month & Year of Passing	Medium of Instruction
Α		ticated trans	cripts of gra	des / ma	arks secu	ured in the q	lard or Equivalualifying exam	•
S. No.	Su	bject studie	d	Maximum		Marks / grade# obtained in the Exam		
1	Biology*							
2	Botany*							
3	Zoology*							
4	Physics							
6	5 Chemistry							
7								
	Liigiisii							
TOTAL								
Perc	entage of ma		ore subjects	will be	taken 1	for rank. * a	s applicable	
# If the candidate produces grade certificates, he/she has to produce actual marks equivalent to the grades otherwise only the minimum marks applicable to the grades in the eligible subjects will be taken into account. 9. Residential and Official address of parents for correspondence: Residence: Office:								
Phone: Phone: Mobile: Fax : e-mail: e-mail: 10. Passport Details of the candidate:								
	Name of the candidate Nationality							
Nam	e of the cand	idate Na	ationality	Passp	ort No.	Place an	d date of issu	e Date of expire

II. Name & Ac	idress of Local Guardian, if any:		
Residence:		Office:	
		Dhana	
Prione:		Phone:	
Mobile:		Fax:	
e-mail:		e-mail:	
12. Full addres	s of the country's Embassy office		
Phone			
Fax:			
e-mail:			

SIGNATURE OF THE PARENT / GUARDIAN

SIGNATURE OF THE APPLICANT

CHECK LIST

The application should be sent along with the photocopies of the following documents:

- 1. Proof of date of birth
- 2. Qualifying examination mark list of the candidate: if the grades are produced, certificate from competent authority showing equivalent marks to grades should be submitted.
- 3. Proof for the Citizenship of the candidate
- 4. Passport of the candidate
- 5. Certificate showing that the candidate has undergone the qualifying school education in **English medium** (or) Certificate from recognized Institutes showing the skill of reading, writing and speaking English.
- 6. Valid VISA.
- 7. Eligibility Certificate from Indian Embassy.
- 8. Health Insurance Policy, vaccination particulars and Medical Certificate (Annexure II) of the candidate <u>must be produced at the time of admission.</u>

ANNEXURE – I

DECLARATION BY THE CANDIDATE

l,	, hereby declare that al
	d enclosures are true to the best of my knowledge and belief
I have read the Prospectus / guidelines and	I I shall abide by the terms and conditions therein. I am aware
that my admission will be provisional and	d in the event of me being found ineligible at the time o
reporting, my admission will be denied an	d if I am already admitted, my admission will be cancelled.
am also aware that in all matters concerni	ng admission, the decision of the Tamil Nadu Veterinary and
Animal Sciences University, Chennai is final	and I shall abide by it.
Place:	Signature of the Candidate
Date:	Name:
DECLARAT	ION OF PARENT / GUARDIAN
l,	, hereby give an undertaking to pay
	till the completion of my son / daughter's course of study, ir
the event of	, who is my son/daughter
being admitted based on the facts given in	the application by my son/daughter.
I also undertake the responsibility for his/h	ner good conduct. The particulars furnished in the application
are true and correct. In case, any particula	rs furnished in the application are found to be incorrect at a
later stage, I agree to forfeit the admission	on of my son/daughter, no matter, at whatever stage of the
course the candidate is at that time. I am	a also aware that in all matters concerning admission of my
	du Veterinary and Animal Sciences University, Chennai is fina
and I shall abide by it.	
Place:	Signature of the Parent / Guardian
Date:	Name:

ANNEXURE-II

MEDICAL CERTIFICATE

(to be produced at the time of admission)

Certi	fied that	: I, Dr		(IMC.R	eg.No) have this
		Day of 202	16 examined th	ne candidate	whose	particulars	are given
belo	w:						
1.	Name	e of the candidate :					
2.	Name	e of the parent / guardian :					
3.	Sex		: N	lale Fe	emale		
			Date	Month	,	Year	
4.	Date o	of Birth	:				
	Age (ii	n years)	:				
5.	Ident	ification Marks	: 1.				
			2.				
6.		ther the candidate fulfils the wing standards?	: Normal	If no, spec	ify the o	l <u>efect</u>	
	a)	General Fitness consists of					
		Complete Blood Test including	g HIV Test Yes/I	No			
		Complete Urine Test		Yes/No			
		Chest X-ray		Yes/No			
		ECG		Yes/No			
		Mental Retardness Test and		Yes/No			
		Other General Tests					
	b)	Vision	:	Yes/No			
	c)	Auditory functions	:	Yes/No			
	d)	Speech functions	:	Yes/No			

7.	Whether Differ (Physically Hand	-	:	Yes/No (If Yes specify the defect and the extent of disability)
	(i)	Vision		
	(ii)	Speech		
	(iii)	Hearing		
	(iv)	Limbs (Upper limbs must be More than 70% of disability is not eligible)		
8.	Please specify, Physically eligib admission in Ta	the above clinical details Whether the candidate ble to be considered for mil Nadu Veterinary and s University, Chennai ne reasons)	is	Yes/No
Signatu	re of the Candid	late	Signature of Re	gd. Medical Practitioner
Place	:		Register No. :	
Date	:		Full Address:	