



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 NRI / WARDS OF NRI / NRI SPONSORED CATEGORIES 2017-18**

(Read the guidelines for admission under NRI / wards of NRI / NRI Sponsored category before filling up the application form)

Degree Programme Applied for: \_\_\_\_\_

*(Separate application should be submitted for each degree Programme along with necessary enclosures with appropriate fees)*

**Affix (do not staple)**  
3.5 x 4.5 cm size  
recently taken  
**Colour Photograph**  
and sign across  
without disfiguring  
the face

	Bank Draft No.	Date	Amount (in US dollars) equivalent to INR 2000/-	Issuing Bank
Registration fee				

**A. DETAILS OF THE CANDIDATE:**

1. Name of the Candidate (as in Mark sheet)

.....

2. Address for Correspondence:

.....

.....

.....

.....

Phone No.(with country code) .....

Mobile No. ....

e-mail: .....

3. Gender :  Male  Female

4. Date of Birth : Day Month Year  
(enclose proof)

--	--	--	--	--	--	--

5. Place of Birth : .....  
(enclose proof)

6. Father's Name : .....

7. Mother's Name: .....

8. Description of NRI status (Proof to be given as in Specimen – I, Ia as applicable)

NRI Status	Please tick the category
NRI Candidate	<input type="checkbox"/>
Ward of NRI (Father / Mother)	<input type="checkbox"/>
NRI Sponsored Candidate	<input type="checkbox"/>

9. Passport details of NRI / NRI Sponsorer:

Name of the NRI / NRI Sponsorer	Nationality	Passport No.	Place and date of issue	Date of Expiry

10. Details of Qualifying Examination (From 10<sup>th</sup> Standard / Equivalent)

Name of the Examination	Registration Number	Name & Address of the School	Name of Board / University and Country	Month and Year of Passing	Medium of instruction

11. Details of Marks obtained in the qualifying examination (12<sup>th</sup> Standard or Equivalent). Attach authenticated transcripts of grades / marks secured in the qualifying examination. (Please enter the subjects studied with marks / grades)

S. No.	Subject studied	Maximum Marks	Minimum prescribed marks / grade for a pass	Marks / grade <sup>#</sup> obtained in the Exam
1	Biology*			
2	Botany*			
3	Zoology*			
4	Physics			
5	Chemistry			
6	Mathematics			
7	English			
<b>TOTAL</b>				

Percentage of mark in the core subjects will be taken for rank. \* as applicable

<sup>#</sup> 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.

12. Name & Address of Local Guardian for NRI / Wards of NRI / NRI Sponsored

Residence: ..... Office: .....  
.....  
.....  
.....  
Phone: ..... Phone: .....  
Mobile: ..... Fax : .....  
e-mail: ..... e-mail: .....

**B. DETAILS OF NRI SPONSORER** (If the sponsorer is other than NRI parents, certificate as per specimen – Ia and II should be enclosed)

13. Name of the Sponsorer : .....

14. Name of the Sponsorer's Father : .....

15. Relationship of the Sponsorer with the candidate: Brother / Sister/ \*Uncle / \*\*Aunt

\* Uncle – Own brother of Father or Mother \*\* Aunt – Own sister of Father or Mother

(Strike out which ever is not applicable)

16. (a) Employment details of the sponsorer (Certificate in Specimen III to be enclosed)

Designation of the sponsorer : .....

Annual Income : .....

Name of the Company / Organisation: .....

Address : .....

.....

.....

(b) If self employed, furnish details : .....

17. Residence and Office address of the sponsorer in the residing country

Residence: ..... Office: .....  
.....  
.....  
.....  
Phone: ..... Phone: .....  
Mobile: ..... Fax : .....  
e-mail: ..... e-mail: .....

.....

.....

.....

.....

.....

.....

Signature of the parent/guardian

Signature of the applicant

Place:

Date:

## CHECK LIST

**The application should be sent along with the photocopies of the following documents by the NRI / wards of NRI candidates:**

1. Recent NRI status certificate of the candidate / parent issued by the Indian Embassy of the Country concerned with their seal as per Specimen-I.
2. Employment Certificate of the NRI parent as per Specimen-III. In the case self-employment, nature of business, annual income and proof thereof.
3. Proof of updated / recent NRI Bank account details and statement of the Parent.
4. Photo copy of the Passport of the NRI candidate /NRI parent
5. Qualifying mark list of the candidate. If grades are produced, certificate issued by competent authority showing equivalent marks to grades should be submitted.
6. Certificate showing that the candidate has undergone the qualifying school education in **English medium**.
7. Transfer Certificate / Migration Certificate from the school last studied / equivalent certificate.
8. Two Recent Passport size colour photographs (in addition to photo affixed in the application)
9. Proof for date of birth
10. Proof for place of birth and nativity
11. Conduct Certificate issued by the Head of Institution last studied
12. Medical Fitness Certificate from a Registered Medical Practitioner, not below the rank of a Civil Surgeon

**The application should be sent with the photocopies of the following documents by the NRI sponsored candidates:**

1. Relationship certificate showing the relationship of the sponsorer to the candidate as per Specimen-II
2. Recent NRI status certificate of sponsorer sponsoring the candidate issued by the Indian Embassy of the Country concerned with their seal as per Specimen-Ia
3. Employment Certificate of the sponsorer as per Specimen-III. In the case of self-employment, nature of business, annual income and proof thereof
4. Proof of updated / recent NRI Bank account details and statement of the sponsorer
5. Photocopy of the Passport of the NRI sponsorer
6. HSC (10+2) or Equivalent Examination Mark Sheet
7. Certificate showing that the candidate has undergone the qualifying school education in **English medium**
8. Transfer Certificate / Migration Certificate issued by the Head of the Institution last studied
9. Two recent passport size colour photographs (in addition to photo affixed in the application)
10. Birth certificate / Proof of Date of Birth of the candidate
11. Nativity Certificate of the candidate
12. Conduct certificate issued by the Head of the institution last studied
- 12-13. Medical Fitness Certificate from a Registered Medical Practitioner, not below the rank of a Civil Surgeon

**FORMAT FOR LETTER FROM EMBASSY**

*(In the Letter head of the Embassy office)*

*(NRI certificate of the candidate / parents)*

No.

Dated:

**CERTIFICATE**

*This is to certify that ....., holder of Indian passport No.....dated .....issued at .....(Place of issue) is residing in this country since ..... He/She is a Non-Resident Indian.*

*(Signature, Designation & seal of the issuing authority)*

**FORMAT FOR LETTER FROM EMBASSY**

*(In the Letter head of the Embassy office)*

*(NRI certificate of the sponsorer)*

No.

Dated:

**CERTIFICATE**

*This is to certify that .....  
.....(Sponsorer's Name) holder of Indian passport No.....dated .....issued at .....(Place of issue) is residing in this country since ..... He/She is a Non-Resident Indian.*

*(Signature, Designation & seal of the issuing authority)*

**FORMAT FOR RELATIONSHIP CERTIFICATE**

*This is to certify that I, ..... (Name of the sponsorer) son / daughter of ..... (Father's Name of the sponsorer) residing at ..... (Full address of the sponsorer) is his/her*

- 1) *Own brother / own sister*  
*or*
- 2) *Father's own brother (or) Mother's own brother*  
*or*
- 3) *Father's own sister (or) Mother's own sister*

*of ..... (Candidate's name), son / daughter of ..... (Father's name of the candidate) residing at .....  
.....  
..... (Full address of the candidate).*

**Signature of the Tahsildar & Seal**

**FORMAT FOR THE EMPLOYER CERTIFICATE**

*(In the Letter head of the Company / Organization)*

No.

Dated:

**CERTIFICATE**

*This is to certify that .....  
(Parent / Sponsorer's name), holder of Indian passport No. .... dated  
..... issued at ..... (Place of issue) is an  
employee of our company / organization since ..... (Date of joining) in the  
position of ..... (Designation) and drawing a monthly salary of  
.....*

*This certificate is being issued upon his/her request for the purpose of college admission.*

(Signature, Designation & seal of the issuing authority)

**ANNEXURE – I**

**DECLARATION BY THE CANDIDATE**

I, \_\_\_\_\_, hereby declare that all the particulars stated in this application and enclosures are true to the best of my knowledge and belief. I have read the Prospectus / guidelines and I shall abide by the terms and conditions therein. I am aware that my admission will be provisional and in the event of me being found ineligible at the time of reporting, my admission will be denied and if I am already admitted, my admission will be cancelled. I am also aware that in all matters concerning 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:

**DECLARATION BY THE PARENT/ GUARDIAN**

I, \_\_\_\_\_, hereby declare that all facts given in the application by the Candidate \_\_\_\_\_ who is my son/ daughter/blood relative are true and correct. In case, any particulars furnished in the application are found to be incorrect at a later stage, I agree to forfeit the admission of my son/daughter/blood relative, no matter, at whatever stage of the course the candidate is at that time. I hereby give an undertaking to pay regularly all his/her dues to the University/Hostel till the completion of his/her course of study. I also undertake the responsibility for his/her good conduct. I am also aware that in all matters concerning admission of my son/daughter/blood relative, the decision of the Tamil Nadu Veterinary and Animal Sciences University, Chennai is final and I shall abide by it.

Place : \_\_\_\_\_ Signature of the Parent /Guardian  
Date: \_\_\_\_\_ Name:



**DECLARATION BY THE SPONSORER FOR THE NRI SPONSORED CANDIDATES**

I, ..... son / daughter of .....  
residing at .....,  
hereby declare that I am the Father / Mother / Brother / Sister / Uncle (own brother of father  
or mother) / Aunt (own sister of father or mother) of the candidate  
.....

I undertake to financially sponsor the above candidate for the entire course of study in Tamil Nadu Veterinary and Animal Sciences University, Chennai. I am also aware that in all matters concerning 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 Sponsorer

Date :

Name :

**ANNEXURE-II**

**MEDICAL CERTIFICATE**

**(to be produced at the time of Admission)**

Certified that I, Dr. .... (IMC.Reg.No. ....)  
have this ..... Day of ..... 2016 examined the candidate whose  
particulars are given below:

1. Name of the candidate : \_\_\_\_\_
2. Name of the parent / guardian : \_\_\_\_\_
3. Sex :  Male  Female
4. Date of Birth : 

--	--

--	--

--	--	--	--

  
Age (in years) : \_\_\_\_\_
5. Identification Marks : 1. \_\_\_\_\_  
2. \_\_\_\_\_
6. Whether the candidate fulfils the following standards? : Normal If no, specify the defect
  - a) General Fitness consists of

Complete Blood Test including HIV Test	Yes/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 Differently abled (Physically Handicapped) : Yes/No (If **Yes** specify the defect and the extent of disability)
- (i) Vision
  - (ii) Speech
  - (iii) Hearing
  - (iv) Limbs (*Upper limbs must be normal. More than 70% of disability in lower is not eligible*)

8. OPINION: with the above clinical details Please specify, Whether the candidate is Physically eligible to be considered for admission in Tamil Nadu Veterinary and Animal Sciences University, Chennai (if **No** specify the reasons) } **Yes/No**

Signature of the Candidate

Signature of Regd. Medical Practitioner

Place :

Register No. :

Date :

Full Address: