



APPLICATION No.....

(To be filled up by the Office)

**SREE GOKULAM INSTITUTE OF PARA MEDICAL SCIENCES**

Venjaramoodu, Trivandrum.

**APPLICATION FORM FOR ADMISSION TO PARAMEDICAL COURSES -2009**

1. DMLT (Diploma in Medical Laboratory Technology)
2. DRT (Diploma in Radiological Technology)
3. DOTT (Diploma in Operation Theatre Technology)
4. DDT (Diploma in Dialysis Technology)

Affix  
Recent Passport size  
Photographs

*(Read the prospectus and Instructions carefully before filling the Application Form)*

1. Name of the applicant in Block letters (initial last)	
2. Sex : Male/Female	Religion & Caste :
3. Date of Birth (a) In Figures In Christian Era (b) In words	
4. Permanent address (with Revenue District and Pin code)	
5. Address to which communications are to be sent (with pin code & Contact Phone No.)	
6. Name, address and occupation of Father/Gaudian.	

7. (a) Are you a Native of Kerala? (write 'Yes' or 'No')			
(b) If the answer is 'No' are you eligible for admission as per the prospectus?			
8. Details of qualifying Examination	Subject	Max.Marks	Marks Obtained
9.Name of Examination – Higher Secondary or Equivalent	Physics		
10. Reg. No.	Chemistry		
11.Month & Year of passing	Biology		
12.Name of the Board/University	Total for optionals		
	English		
	Grand Total for H.S.C/P.D.C		

### **DECLARATION**

1. I, solemnly and sincerely affirm that the statements made and information furnished in my application form so as also in all the enclosures there to submit by me are true. Should it however be found that any information furnished therein is untrue in material particulars, I realize that I am liable to criminal prosecution and also agree to forego my seats.
  
2. I have fully read the conditions for admission to Paramedical Course as contained in the prospectus and I agree to abide by them.

Place:

Date:

Signature of Applicant

**CERTIFICATE OF NATIVITY, RESIDENCE, OWNERSHIP OR POSSESSION  
OF LANDED PROPERTY OR HOUSE**

Certified that Sri. / Smt.....  
.....House.....Village  
.....Father/Mother/Guardian\* of Sri/Smt/ Kumari  
.....an applicant for Paramedical Courses, is a Native of  
Kerala for a period of Seven years within a continuous period of fifteen years.

Station:

Name & Signature:

Date:

Village/Taluk:

District:

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\* Only if father/mother or both are not alive.

NB – Filledin applications with supporting documents are to be sent by post with a DD for Rs.300 in favour of SGIPMS , Venjaramoodu, Trivandrum to the following address :

DIRECTOR  
SREE GOKULAM INSTITUTE OF PARAMEDICAL SCIENCES  
VENJARAMOODU  
TRIVANDRUM  
PIN-695607