



## **C. U. SHAH PHYSIOTHERAPY COLLEGE**

**C. U. SHAH MEDICAL COLLEGE CAMPUS,**

**DUDHREJ ROAD, SURENDRANAGAR – 363001, GUJARAT, INDIA**

**Tel: 91-2752-304000 to 004 Fax: 91-2752-256006 email: [cushahmedical@gmail.com](mailto:cushahmedical@gmail.com)**

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**APPLICATION FOR ADMISSION TO BACHELOR  
OF PHYSIOTHERAPY COURSE  
NRI / NRI SPONSORED QUOTA- 2009-10**

**NAME OF CANDIDATE:** \_\_\_\_\_

<b>FORM No.</b> _____	<b>ISSUE DATE:</b> / /2009
<b>REGISTRATION No.</b> _____	<b>REGISTRATION DATE:</b> / /2009



(Managed by SAURASHTRA MEDICAL CENTRE)

## C.U. SHAH PHYSIOTHERAPY COLLEGE

### C.U. SHAH MEDICAL COLLEGE CAMPUS

Dudhrej Road, Surendranagar - 363001, Gujarat, India, Tel: 91-2752-256001, 304000 to 004. Fax: 91-2752-256006

Email: [cuspc@yahoo.com](mailto:cuspc@yahoo.com), [cuspc@rediffmail.com](mailto:cuspc@rediffmail.com), Website: [cushahmedicalcollege.org](http://cushahmedicalcollege.org)

### APPLICATION FOR ADMISSION TO B. P. T COURSE UNDER NRI CATEGORY FOR THE ACADEMIC YEAR 2009-10.

FORM NUMBER & DATE

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REGISTRATION No & DATE

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STICK  
RECENT  
PASSPORT SIZE  
COLOUR PHOTOGRAPH  
OF THE CANDIDATE  
HERE

#### **A. PERSONAL INFORMATION:**

(Fill in bold, block letter in your own hand writing)

01. Name of the Applicant full : \_\_\_\_\_  
Address : \_\_\_\_\_

Telephone/Fax/email : \_\_\_\_\_

01.1. Nationality: \_\_\_\_\_

01.2. Religion & caste: \_\_\_\_\_

01.3. Sex :

Male / Female

01.4. Date of Birth & Place of Birth

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01.5. Name of the Father : \_\_\_\_\_  
Address : \_\_\_\_\_

Telephone/Fax/email : \_\_\_\_\_

01.6. Name of the Mother : \_\_\_\_\_  
Address : \_\_\_\_\_

Telephone/Fax/email : \_\_\_\_\_

#### **B. DETAILS OF NRI / NRI SPONSORED STATUS :**

02.1. Name of NRI Candidate/  
NRI Parent/NRI Sponsor : \_\_\_\_\_

02.2. Passport No. & Date : \_\_\_\_\_

02.3. State of Present Residence: \_\_\_\_\_

02.4. Length of present residence: \_\_\_\_\_

02.5. State of Domicile : \_\_\_\_\_

02.6. State & District of Origin : \_\_\_\_\_

02.7. Nature of relation with student: \_\_\_\_\_

**C. ACADEMIC RECORD OF THE CANDIDATE:**

**03 If the candidate has passed qualifying examination from INDIA :**

03.1 Qualifying examination : \_\_\_\_\_

03.2 Name & address of School : \_\_\_\_\_

03.3 Name of Board/authority : \_\_\_\_\_

03.4 Year of passing & Seat No. : \_\_\_\_\_

03.5 Marks obtained in qualifying examination :

Subject/s	Theory		Practicals		Total	
	Obtained	Out of	Obtained	Out of	Obtained	Out of
PHYSICS						
CHEMISTRY						
BIOLOGY						
ENGLISH						
LANGUAGES						
<b>TOTAL</b>						
<b>CET Marks, If appeared</b>						
QUALIFYING MERIT MARKS & PERCENTAGE:						

04. Marks obtained in S.S.C or equivalent examination & percentage: \_\_\_\_\_ /

**D. ENCLOSURES / ANNEXURES:**

The following documents/attested copies of certificates are enclosed with this application :

- 5.0 Copy of Mark-sheet of qualifying examination
- 5.1 Copy of mark-sheet of S.S.C or equivalent examination
- 5.2 Copy of school leaving certificate / Proof of date of birth
- 5.3 If self is NRI, copy of passport
- 5.4 If parents are NRI, copy of passport of Father/ mother
- 5.5 If sponsored by NRI, copy of passport of relative
- 5.6 If sponsored by NRI relative, copy of notarized affidavit
- 5.7 Recent passport size colour photographs ( 5 copies)
- 5.8 Self-addressed stamped envelope
- 5.9 Equivalency certificate, if applicable, from concerned authorities

### **DECLARATION BY THE CANDIDATE**

1. I hereby state that I have filled this form myself, and to the best of my knowledge and belief, the particulars given above are true.
2. I hereby undertake to abide by all the conditions, rules and regulations in force at present and also those, which may hereafter be introduced by the administration of the college, hostel and hospital.
3. I hereby undertake that I shall pay all the fees and other dues to the Institution promptly.
4. I will do nothing unworthy of a student of the college either inside or outside or that will interfere with its orderly working and discipline.
5. I am aware that the management has the full authority to expel me for disinterest in studies, misbehaviour and continuous failures.
6. I agree to work without any financial rewards like remuneration, honorarium, stipend etc. during my internship training.
7. I further understand that my admission in NRI quota, if given, is purely provisional subject to the verification of the eligibility conditions by Hon. Supreme Court of India and other concerned authorities.
8. I understand that, the tuition fees payable by me is Rs.50000 per semester and I/My parent/My sponsor are willing to pay the amount as per schedules of the institution. I also understand that, I abandon the course without completion I/My parent/My sponsor are liable to pay the full amount of fees payable for nine semesters.
- 9. I am aware that RAGGING is a punishable offence and I undertake that I will not indulge in any ragging activity in the campus as well as outside the campus.**

Place:

Date:

**Signature of the Candidate**

### **DECLARATION BY THE PARENT/ GUARDIAN**

I hereby declare that I have known the financial obligations and I (The sponsor in case of NRI sponsored candidates) can afford to pay all the costs and undertake to pay the tuition and other fees payable to the institution under the rules framed from the time to time by the Management.

I understand that, the tuition fees payable by me is Rs.50000/- per semester and am willing to pay the amount as per schedules of the institution. I also understand that if my son/daughter/ward abandon the course without completion I am/ sponsor is liable to pay the full amount of fees payable for nine semesters.

Place:

Date:

**Signature of the Parent/ Guardian**

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