

APPLICATION FOR ADMISSION

INSTRUCTIONS	<p>Print this form and fill out pages 1 through 2 NEATLY. Then Sign and mail the completed form along with :</p> <ul style="list-style-type: none"> ✚ A passport photo of yourself ✚ Transcripts from each college or school you have attended. Student copies are accepted. ✚ A check for \$100 ✚ Letters of Recommendation; please have at least two letters of recommendation or a letter from the pre-health committee, sent directly to NRIAS as soon as possible. We can begin processing your application, but they are required to complete the process. <p>Mail to:</p> <div style="border: 1px solid black; padding: 5px;"> <p><u>Indian / NRI Students:</u> The Secretary, NRI Academy of Sciences, Chinakakani, Mangalagiri Manadal Guntur District, Andhra Pradesh, India -522503.</p> </div>
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Undergraduate Course	Post Graduate Course (preference)	Super Specialty (Option)
M.B.B.S	1. _____ 2. _____ 3. _____	1. _____ 2. _____

Personal Information

Last Name :		First Name:			Middle Name:			
Date of Birth	Day:	Month :	Year :	Gender	Male		Female	
Social Security Number (NRIs)		Country of Birth & Citizenship						
Father's Name		Occupation						
Mailing Address (Please notify change in your contact details ie. address, email and Phone Nos) to ensure timely communication.								
City:				State:				
PIN:				Country:				
Telephone Number (with code)			Fax Number (with code)					
Cell phone Number								
E-mail ID								
Emergency Contact								

ACADEMIC DATA

Level /Grade	Institution attended	Dates		Subjects Taken	% / Grade
		From	To		
IX					
X					
XI					
XII					

Minimum qualifying limit : 50% marks OR equivalent Grade in Biology, Physics, Chemistry and must have read English. Official copies of transcripts from all schools attended are required and must be sent before enrolment. (The degree-granting transcripts must contain a graduation date.) Student copies are acceptable at this stage, in order to expedite the application process. Please indicate the required pre-med courses that you have completed.

PASSPORT INFORMATION

Country of Origin		Attach Passport Photo here
Passport Number		
Visa Status (If applicable)	Type: (In view of the recent guidelines of Government of India, all NRI students have to submit proof of appropriate VISA for the entire study period. It is better to have an 'Overseas Citizen of India' (OCI Card) to be free from multiple entry restrictions.	

List extra-curricular activities in which you have participated while in college or thereafter					
What clinical experiences in hospitals, clinics or other health professional practice have you had? Indicate time spent					
Are you presently under a physician's supervision?					
Are you presently taking any medications?					
Have you ever been convicted of a felony, misdemeanor, or other crime?	No		yes		If yes, state details and reason:
Have you ever traveled, studied, or lived outside the U.S.?	No		yes		If yes, where and for how long?
Have you ever been expelled, suspended, disciplined or placed on academic probation at any institution					

How did you know about NRIAS?

Poster		Newspaper Add, Which News Paper	
Pre-Med Advisor, School & Name		E-Mail	
NRI Medical College Student		Student Name & Year	
Website		Others, Describe	

CERTIFICATION

I certify that the answers to the above questions are complete and accurate, and I understand and agree that any omission or misstatement in the answering of any questions in this application, whenever discovered, may result in the voiding of my acceptance and/or registration, in which event I will receive no credit for attendance at the University. I have read the University's recent catalog and handbook and updates, and agree to abide to all the rules, regulations and directions of the University as they now exist and as modified, and understand that the rules, regulations, and directions of the University are subject to change without notice.	
Signature of the Student	Date:

PARENT'S DECLARATION

I, _____ (father / mother / guardian) of the above named student / applicant have fully read and understood the contents and declare that all the statements made and information provided above are true in all respects and further declare that both me and the above named student voluntarily declare that we will abide by both the explicit and implied conditions governing the admission and also wholeheartedly cooperate with the Management in all aspects of discipline, education and matters related or connected thereto.	
Signature of Parent / Guardian	Date: