



THAKARDEVI TAKANRAM D.A.V. INSTITUTE OF PHYSIOTHERAPY & REHABILITATION

Professor Colony, Yamuna Nagar - 135 001 (Haryana)

Ph. : 01732-226823, Fax No. 01732-201178

APPLICATION FORM FOR
ADMISSION To
FIRST YEAR B.P.T. & M.P.T.
COURSE 2018 - 2019

1. Course Applied for : tick to choose the course

Bachelor of Physiotherapy

Master of Physiotherapy

2. Speciality Applied for

MPT Orthopaedics

MPT Neurology

3. In case of applying for all the specialties Mention the order of Preference

1.....2.....

4. Full Name (Inblock letters) _____

5. Father's Name (In block letters) _____

6. Mother's Name (In block letters) _____

7. A..Date of Birth _____ B.Age as on .31.12..2018 _____
(As per Matric or its equivalent certificate)

8. Sex : _____ 9. Nationality : _____

10. Phone No. : _____ 11. Mobile No. : _____

12. Category : **General Yes/No**

Reserved Yes/No If Yes Mention Category _____

13. Full Postal Address (With Pin Code) _____

14. Particulars of Pre - Medical / Senior Secondary Certificate (10+2) or any equivalent examination from any Indian Foreign University/Board on the basis of which eligibility is being claimed.

Name of qualifying examination passed _____

University/Board _____ Year/Month _____ Roll No. _____

Subject	Max. Marks	Marks Obtained	%age of Marks	Remarks
English				
Physics				
Chemistry				
Biology				
Total				

15. Write "Yes" if passes 10+2 or equalant examination from Board/ University located in Haryana, otherwise write "No" _____

16. **Whether appeared for National Entrance Test-2018 : Yes/NO**

if yes (i) Mark _____ (ii) Rank _____

17. **Professional Qualification (for M.P.T. Applicants only)**

S.no.	Degree	College/Institute	University Marks	Maximum Obtained	Total Marks Obtained	% of Marks

18. Father/Guardian Particulars : Occupation : _____ Nationality : _____ Annual household income : _____

19. **Undertaking**

I, _____ candidate, Son/daughter of Sh. _____
Resident of village/Town/City _____ Tehsil _____ District _____

We do solemnly declare that the following are true to the best of our knowledge :-

- That the information given in this application is absolutely correct and true.
- I undertake that if admitted. I will strictly obey all rules and regulation in force at present or that may be made altered/modified here after and will do nothing either inside the college or outside it that will interfere with the orderly administration and discipline.
- If at any time subsequent to my admission, discovered that any information given in this application is false, I may be removed from the college and all fees paid by me are liable to be confiscated. The authorities may also take any further action against me or my father/guardian as it deems fit.
- We have read the Prospectus carefully and undertake to obey all the rules and regulations etc. regarding distribution of seats and payments of fees etc.

Signature of the Father/Guardian

Signature of the applicant

Affix one attested
Passport size
Photograph

INSTRUCTIONS :

1. The Form Should be neat & legibly filled in Block letters
2. Incomplete application will not be considered. Attach all the originals and attested photo copies of documents as per this prospectus.
3. The college prospectus must be read carefully.
4. Application once submitted will not be returned.

Details of documents attached (See Prospectus) point 5.4. a. i & ii

- | | |
|--------|----------|
| 1..... | 6. |
| 2..... | 7. |
| 3..... | 8. |
| 4..... | 9. |
| 5..... | 10. |

Cost of Prospectus : Receipt /DDNo. _____ Dated _____ Amount _____

Signature of the applicant
Father/Guardian

Signature of Candidate/

TO BE FILLED IN BY OFFICE ONLY

Application No. _____ Dated _____

Regn. No. _____ Roll No. _____

1. Marks obtained in the qualifying examination as per Prospectus i.e. English, Physics, Chemistry and Biology _____ out of _____ Wheather Pass 10+2 : Yes/No
 2. % of Marks in qualifying examination _____
 3. **CET 2018** Rank NumberNo. _____
 4. Merit No. **CET**/Qualifying Examination _____
 4. Date of Birth _____
 5. Category of which applied for _____
 6. Eligible _____ Eligible subject to _____ Reason if not eligible _____
Yes / No. _____ Production of _____
- | | | | |
|------------|---|---|---|
| Clerk..... | 1 | 2 | 3 |
|------------|---|---|---|

Internal Admission Committee Members Signature

Principal..... State Govt. Observer..... University Representative.....
Dated _____

7. 1.Fees Paid Rs. _____
2.Receipt No. _____

Accountant.....

8. Roll No. allotted.....