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**APPLICATION FORM FOR  
PG DEGREE / DIPLOMA / 6 YEAR M.Ch. (NEURO SURGERY) / MDS COURSES  
2012 – 2013 SESSION**

(TICK ✓ THE RELEVANT COLUMN)

<b>APPLIED FOR</b>	<b>PG</b>	<b>MDS</b>

<b>SERVICE PARTICULARS</b>	<b>TN. Govt. SERVICE</b>	<b>NON SERVICE</b>

<b>COMMUNITY</b>	<b>OC</b>	<b>BC</b>	<b>BCM</b>	<b>MBC/DNC</b>	<b>SC</b>	<b>SCA</b>	<b>ST</b>

<b>PHYSICALLY DISABLED</b>	<b>YES</b>	<b>NO</b>

<b>GENDER</b>	<b>MALE</b>	<b>FEMALE</b>

<b>M.B.B.S. / B.D.S. Studied at</b> .....
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**From :**  
(Candidate's Mailing Address)

Dr.....  
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.....Pincode :.....  
Phone/Mobile : .....

<p><b>To.</b> <b>The Secretary,</b> <b>Selection Committee,</b> <b>Directorate of Medical Education,</b> <b>No. 162, Periyar E.V.R. High Road,</b> <b>Kilpauk, Chennai – 600 010</b></p>
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