

Cost of application form Rs. 100/-

**APPLICATION FOR ISSUE OF ELIGIBILITY CERTIFICATE**

**FELLOWSHIP PROGRAMME  
(In Sub – Speciality)**

[Read the instructions carefully. Fill up all the columns and attach relevant Original certificates along with the application form. Add Rs.100/- along with the prescribed fee if the application form is downloaded from the website.]

From (Self Address)

**Serial No.**

RTGS / NEFT /IOB Challan No:

Date of RTGS/NEFT/IOB Challan

Name of Bank:

Amount

**For Office Use Only :**

a) Application Received by:

b) Signature of the Assistant/A.S.O& S.O

Checked the E.C Application

To

The Registrar,  
The Tamil Nadu Dr. M.G.R. Medical University,  
Chennai - 600 032.

Sir/Madam,

I request you to kindly issue me the Eligibility Certificate for seeking admission to Fellowship Programme (In Sub – Speciality) in the affiliated institution of this University for the Academic Year 20..- 20..

1. Name of the Course :
2. Name of the applicant : Thiru/Tmt/Selvi/  
(In **BLOCK LETTERS** as per records) :
3. Name of the Father / Guardian :
4. Nationality :

5. Date of Birth & Age :

6. (a) Name of the Qualifying Examination passed :

(b) Register Number, month and year of passing :

(c) Name of the University & place :

(d) Name of the State Council in which the Qualifying Examination is registered :

(e) Council's Registration No. & date :

7. Name of the University, which issued the Migration Certificate to the Candidate :

a) Migration Certificate No.& date :

8. Please Tick the Original Certificates enclosed with the application:

Post Graduate in the Concerned Speciality with DNB/MD/MS/DM/M.Ch.,	Council's Registration Certificate	Migration Certificate	Other Certificates, if any

9. Whether the eligibility certificate is required in person or to be sent by post or to others with authorization letter :

10. Address to which the E.C is to be sent (In BLOCK LETTERS) (Attach self addressed sufficiently stamped envelope) :

**DECLARATION**

I hereby declare that all the particulars furnished in the application form is correct to the best of my knowledge.

PLACE :

DATE :

Signature of the Applicant

**Instructions to the Candidates to apply for the issue of Eligibility Certificate for admission to Fellowship Programme (In Sub – Speciality) Course.**

1. Candidates who have passed the qualifying examination other than the Tamil Nadu Dr. M.G.R. Medical University, Chennai, University of Madras, Bharathiar University, Bharathidasan University and Madurai Kamaraj University shall obtain an eligibility certificate from this University .
2. Candidate has to submit duly filled in Eligibility Certificate application form downloaded from the Website of The Tamil Nadu Dr. M.G.R. Medical University [www.tnmgrmu.ac.in](http://www.tnmgrmu.ac.in) either in person or by post.
3. The candidate has to remit a sum of Rs. 1600/- towards the cost of application and Eligibility fee through "Payment Gateway for students & others" provided in the Online Remittance System in the University website or the IOB challan to be paid at The Tamil Nadu Dr. M.G.R Medical University Premises. No demand Draft / Banker's Cheque will be accepted for the above amount.
4. The amount once remitted by the candidate to the University will not be refunded at any cost.
5. Candidates should apply for Eligibility Certificates before admission in the College/Institution. Eligibility Certificate will not be issued after admission to the course. Candidates seeking Eligibility Certificate must fill up the application form in his/her own handwriting and sign in the application without fail. Others should not sign in the application form. If others signed in the application form, the same will be summarily rejected. Only one eligibility certificate will be issued to a candidate or an authorised person.
6. **ADMISSION TO FELLOWSHIP PROGRAMME (IN SUB – SPECIALITY) COURSE.**
  - a) The admission for the Fellowship Programme is twice in a year. (i.e.) 1<sup>st</sup> January and 1<sup>st</sup> July.

b) Candidates who have passed the Post Graduate in Concerned Speciality with DNB/MD/MS/DM/M.Ch. are eligible for admission to the Fellowship Programmes. They must produce the original Post Graduate Degree Certificates issued by the University concerned for verification and also produce the Transfer and Migration Certificate obtained from the University concerned.

7. Candidate has to furnish the following documents in ORIGINAL and one set of Xerox copies

- a) Qualifying Examination Provisional/Degree Certificate.
- b) State Council's Registration Certificate.
- c) Migration Certificate.

The originals will be returned along with the Eligibility Certificate retaining the Xerox copies.

8. The University will issue the Eligibility Certificate in the month of June and December every year.

9. The last date for applying the Eligibility Certificate for Fellowship Programme (In Sub – Speciality) Course is 31<sup>st</sup> January and 31<sup>st</sup> July of every year.

10. Application for the issue of Eligibility Certificate will not be entertained after the prescribed cut-off-date for admission to the Fellowship Programme (In Sub – Speciality) Course.

11. Institutions / Agents / Mediators are not allowed to apply for the eligibility certificate on behalf of the candidate.

### **ELIGIBILITY CRITERIA**

Candidates for admission to the Fellowship Programme (In Sub – Speciality) Course shall be required to possess the following qualifications :

This is a post doctoral fellowship. Hence the eligibility criteria is Medical Post Graduation in the concerned speciality with DNB/MD/MS/DM/M.Ch.

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