

Application No: TSNA / 2014



The Sankara Nethralaya Academy

(Unit of Medical Research Foundation)
No 9, Vanagaram Road, Ayanambakkam
Chennai - 600 095, Tel : 044 4908 6000



Visit us at: www.thesnacademy.ac.in

APPLICATION FORM FOR ADMISSION OF

MBA (HOSPITAL & HEALTH SYSTEMS MANAGEMENT) PROGRAM (Affiliated to The Tamil Nadu Dr M G R Medical University, Chennai)

Name of the Applicant with initial (as in Qualifying Certificate – in BLOCK letters):

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Expansion of Initials

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Address for Communication:

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Pin code:

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E-Mail ID:

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Phone with STD Code:

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Mobile:

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Sex :

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Date of Birth: Date:

Month:

Year:

Nationality:

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Payment Details:

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Particulars of Demand

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DD. NO :

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Rs.

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Date:

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Bank

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Note : The Candidate should write his / her name on the reverse of the demand draft.

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Details of Educational Qualifications:

<i>Course Studied</i>	<i>Name of the Degree</i>	<i>Major</i>	<i>Month & Year of Passing</i>	<i>Name of the Institution/College/University</i>	<i>Percentage of Marks/Class</i>
SSLC					
HSc					
Under Graduate					

(Enclose Attested copies of Plus Two/Hr. Secondary and UG/PG Provisional Certificate or Degree Certificate.)

Additional Qualification (courses and programmes attended)

Course Description	Date			Duration
	DD	MM	YY	

Language Proficiency:

Knowledge of English:

Speak

Read

Write

Languages known:

Have you attended any Education Programme at Sankara Nethralaya?

Course Attended	Period					
	From			To		
	DD	MM	YY	DD	MM	YY

Professional Experience

Employment Record: List positions held during the last 2-3 years, beginning with present position (if applicable)

Name of the Organization	Title or Position	Period	
		From	To

I hereby declare that the particulars given above are true. If any of the particulars furnished are found to be false, I agree to forfeit my

Date:
Place :

Signature of the Candidate

Enclosures:

Note: Attested photocopies of the following should be enclosed with the application form

1. SSLC, HSc, Degree Certificates (Attested photocopy).
2. Photostat and attested copies of certificates in support of your academic Qualifications.
3. Photostat copies of attainments, if any, in extracurricular activities, and other training undergone.
4. Two Passport Size Photographs (recent).
5. Copy Identification proof.
6. DD drawn in favor of “**Medical Research Foundation**” Payable at Chennai.

Filled in application form with enclosures to be forwarded to:

The Assistant Registrar
The Sankara Nethralaya Academy
No 9, Vanagaram – Ambattur Road,
Kil Ayanambakkam, Chennai – 600 095
Tamil Nadu, India