

KRISHNA INSTITUTE OF MEDICAL SCIENCES DEEMED UNIVERSITY, KARAD

APPLICATION FOR COURSES UNDER DEPARTMENT OF HIGHER STUDIES

 M. Sc. Molecular & Human Genetics M.Sc. Epidemiology M.Sc. Anatomy M.Sc. Physiology M.Sc. Medical Microbiology Masters Public Health Post Graduate Diploma 	 Post Doctoral Fellowships Neonatology Perinatal Medicine / Maternal Fetal Medicine Cleft Lip & Plate Geriatrics Medicine Sports Medicine Assisted Reproductive Technology Minimal Access Surgery 	 Emergency Medicine & Critical Care Echocardiography Spine MicroEndodontics Certificate Courses Oral Implantology Maxillofacial Prosthodontics Laser Dentistry
1. Name of the Candidate :		
2. Date of Birth : / /	3. Sex :	Male Female
4. Address :		
5. Telephone No. with Code : Cell No :		
6. E-mail Address :		
7. Name of the qualifying examination passed		
8. Details of major subject (if any) :		
9. Documents to be attached :		
 HSC Certificate Certificate of qualifying examination 		lifying examination
 Mark list of qualifying examination I-card size photographs (2) 		

I hereby declare that the above information is true and complete to the best of my knowledge. I am aware that if any information herein is found to be incorrect or incomplete, my application form will be rejected / admission will be cancelled.