



ALL INDIA INSTITUTE OF MEDICAL SCIENCES MANGALAGIRI, ANDHRA PRADESH

APPLICATION FORM FOR Ph.D. ADMISSION, JULY 2026 SESSION

Applied for-	Ph.D. in (Write affiliated department name as per Prospectus)						
Applied under:	Category A / B:						
Fee Details:	NEFT/RTGS/Trans./SBI Collect No. _____ Bank Name: _____ Date: _____ (Please attach proof of payment)						
1	Name (BLOCK letters)					Affix passport Size Photograph	
2	Father's Name						
3	Date of Birth						
<i>(Please attach self-attested copy of relevant certificate)</i>							
4	Permanent Address						
5	Address for correspondence						
6	Mobile No. / Tele. No.				7. Citizenship		
8	e-mail id				9. Gender	M/F	
10	Category	UR	SC	ST	OBC	EWS	PWBD
<i>(Please tick (√) the appropriate category and attach attested copy of relevant certificate)</i>							

11 Educational Qualification							
S. No.	Professional Education	Year of Final exam	Name of Institute	Name of University	Medals & awards if any	Total percentage obtained/Pass	No of Attempts
1							
2							
3							
4							
5							
6							

***Attach self-attested copies of relevant documents.**

12. Research Publications (Attach copies of publication)

Title of Publication	Author (As 1st, Correspondence /Co-author)	Name of Journal	Indexing Details	Date of Publication

13. Projects with Grant (If any)

Title of Publication	Name of Principle Investigator	Project sanctioned by/ Funding agency	National /International	Date of Sanction and amount

Declaration

I hereby declare, that all statements made in this application are true, complete and correct to the best of my knowledge and belief. In the event of any information being found false or incorrect, my candidature is liable to be cancelled/ terminated. I have read the details of fellowship and period of fellowship. I will not ask for the fellowship beyond the date specified in the advertisement. I shall abide by the terms & condition as prescribed and amendment from time to time. In the event of ineligibility, being detected before or after the selection procedure, action can be taken against me under the relevant rules/instruction and I hereby undertake to abide by them.

*****Check List*****

Enclosures: -

S.No.	Particulars	Please Tick
1.	Application fee paid transaction details	
2.	Class X certificate for Date of Birth	
3.	UG Mark Sheet & Certificate/Provisional Degree/Degree Certificate	
4.	Internship Completion Certificate (As applicable)	
5.	PG Mark Sheet & Certificate/Provisional Degree/Degree Certificate	
6.	MCI/NMC/DCI Registration (as applicable)	
7.	SC/ST/OBC/EWS/PWBD Certificate issued by the competent Authority (If applicable)	
8.	Address Proof & ID Proof (Aadhar card)	
9.	NOC (if applicable)	
10.	Copies of any other relevant documents in support of candidature	

Date:-

Signature of Candidate