

SHARAVATHI EDUCATION TRUST®
APPLICATION FOR ADMISSION TO B.D.S.COURSE 2015-16

Photo

SHARAVATHI DENTAL COLLEGE & HOSPITAL

(Recognised by the Dental Council of India, New Delhi)

Alkola, T.H. Road, Shimoga – 577205. Karnataka. INDIA. Ph : 08182-250167 / 250816

Date : / /

Registration No.
 (To Be Entered by Office)

1) Name of the Applicant (In Block Letters) As per 10 th Std. Marks Card					
2) (a) Father/Guardian Name (b) Name of the Mother					
3) Address for Correspondence: (In block Letters)					
Phone Number with STD Code					
4) Permanent Address (In Block Letters)					
Phone Number with STD Code					
5) e-mail :					
6) (a) Nationality					
(b) Religion					
(c) Whether you belong to SC/ST? (Specify Caste)					
(d) Sex		Male / Female			
(e) Date & Place of Birth					
7) Details of qualifying Examinations Passed:					
Examination	Name university or Board	Year of Passing	Optional Subjects (Science subjects)	Marks in Science Subjects (Excluding Mathematics)	
				Marks Obtained	Max. Marks
a) Pre-university or intermediate Examination (10+2 Years' course)			1 Physics		
			2 Chemistry		
			3 Biology		
			Total		
			4 English		
			Total		
b) B.Sc., Examination (if any)					
Total Percentage of Marks obtained in Physics, Chemistry & Biology.					%

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8. Name & Address of Institution Last Studied				
9) Institutions at which the applicant studied during the last FIVE years				
	Institution	State	Year	Class
1				
2				
3				
4				
5				
10) Whether you have appeared for: Common Entrance Test		Yes / No		

Signature of Parent/Guardian

Signature of the Applicant

INSTRUCTIONS TO APPLICANTS

1. Candidates must have passed individually in the subjects of Physics, Chemistry, Biology and English and must have obtained a minimum of not less than 50% marks in English, Physics, Chemistry & Biology taken together in the qualifying Examination. In respect of Scheduled Caste/Scheduled Tribes and Category-I, the minimum marks prescribed shall be not less than 40% of the total marks in lieu of 50% marks for general candidates.
2. This application along with one set Photostat copies of the Marks Cards of X, XII Standards & Transfer Certificate, Migration Certificate and two passport size photos, Admission Ticket, Score & Rank Card of COMED K / CET (If any) should be sent to the **Principal, Sharavathi Dental College and Hospital, Shivamogga – 577 205 by Registered post.**
3. Scheduled Caste/Scheduled Tribe students should produce the Caste and Income Certificate issued by Tahasildar for current academic year at the time of Admission.
4. Applications are available at free of cost from the College office or Can be downloaded from College website **<http://www.sharavathidc.org>**
5. Students other than pre-university board of Karnataka have to produce **Eligibility Certificate** at the time of admission, however, they have to apply before closing date to the **Registrar, Rajiv Gandhi University of Health Sciences, Karnataka, Bangalore – 560 041. (Ph : 080-26961928/26961929) Website: www.rguhs.ac.in** along with prescribed fees by demand draft drawn in favor of **Registrar, Rajiv Gandhi University of Health Sciences, Payable at Bangalore** and enclose the Xerox copy of the application and demand draft as proof for having applied for issue of Eligibility Certificate.
6. All Correspondences would be addressed to **The Principal, Sharavathi Dental College and Hospital, Shimoga –577205.**
7. Name and address of the Hostel including Room Number should be furnished in writing after admission to the hostel.
8. Students who are not residing at hostel should furnish their residential address and Telephone No. as and when it becomes available.
9. Change of address / local address is to be informed as and when it is changed.

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FOR OFFICIAL USE ONLY

Admitted to : _____ Batch : _____

Admission No : _____ Fees paid Rs. : _____

Receipt No. : _____ Date : _____

Original Certificates Submitted for B.D.S Admission

	Yes	No
1. 12th Marks card	<input type="checkbox"/>	<input type="checkbox"/>
2. 10th marks card	<input type="checkbox"/>	<input type="checkbox"/>
3. Nationality	<input type="checkbox"/>	<input type="checkbox"/>
4. 5 Photo (Passport size)	<input type="checkbox"/>	<input type="checkbox"/>
5. CET Rank card	<input type="checkbox"/>	<input type="checkbox"/>
6. Comed-K Rank card	<input type="checkbox"/>	<input type="checkbox"/>
7. NEET Rank card	<input type="checkbox"/>	<input type="checkbox"/>
8. Transfer Certificate	<input type="checkbox"/>	<input type="checkbox"/>
9. Eligibility Certificate	<input type="checkbox"/>	<input type="checkbox"/>
10. Migration	<input type="checkbox"/>	<input type="checkbox"/>
11. Cast Certificate	<input type="checkbox"/>	<input type="checkbox"/>
12. NRI Quota		
a. NRI sponsorship letter	<input type="checkbox"/>	<input type="checkbox"/>
b. Visa	<input type="checkbox"/>	<input type="checkbox"/>
c. Passport	<input type="checkbox"/>	<input type="checkbox"/>
13. If any other document, mention:		

Signature of Clerk/Superintendent

Signature of Principal