

Annexure II

Proforma for Religious & Linguistic Minority certificate

(To be issued by the competent Revenue authority of the candidate's native jurisdiction)

(This certificate is used for the purpose of seeking admission to Post Graduate MD/MS/Diploma courses for the academic year 2023-2024 under minority category)

This is to certify that Dr.

S/o. D/o. of Thiru.....belongs

to religion and mother tongue is

Signature:

Name and Designation :

(with office seal)

Place..... Taluk

Date..... District

(This certificate should be obtained from the rank of Tahsildar)Enclosure

- 1) Nativity certificate of the candidate
- 2) Community certificate of the parent (Not applicable for forward community)
- 3 Study certificate of the parent

ANNEXURE III

Ward Certificate (Children of Non-resident Indian or their wards)

(for admission under NRI Quota seats)

I.....Son of Thiru/Tmt.....

(name of Guardian)

Aged.....yearsholding an.....Passport

(Date of Birth)

And residing at

.....

.....Telephone No.....Mobile No.....

e-mail ID.....

do hereby solemnly affirm and state that, Thiru/Tmt.....

S/o. D/o of

Who is seeking admission to Post Graduate Medical courses through Tamil Nadu for the year 2023-2024
Is my "ward".

I would wish to state that I am the guardian of the said candidate for the entire course of study and will
be legally responsible for his/her Post Graduate Study.

Passport Details:

Passport No..... Place of issue

Date of Issue Date of Validity of Passport

Bank Account Details:

Nature of Account

Name of the Bank and Address

Relationship with the student

(Signature of the Guardian)

Date:.....

Place.