

HEALTHCARE GLOBAL ENTERPRISES LTD.,

HCG Towers, #8, P. Kalinga Road, Sampangi Ram Nagar,
Bangalore – 560 027. Phone No. 080 33712250

Affix Student
Pass port
Size Photo

Applied for

Name (in block letters as per SSLC / Xth Std. Markscard)::	Name of the Father / Guardian :
Date of Birth:	Sex : Male / Female
National:	State of Domicile:
Email ID:	Contact No:
Permanent Residential Address	Present Address & Contact No

Details of Qualification appeared / passed:

Qualification	Name of the school / college	Board / University	Subject of Examination	Year of Passing	% of Marks

Declaration:

I hereby declare that the particulars given in this application form are correct. In the event, any information furnished by me is found to be false or incorrect before or after the test / interview, the authority conducting the test/ interview can cancel my candidature, selection or admission as the case may be.

Signature of the candidate
Place:
Date:

Signature of the Parent / Guardian

Please read the following instructions before filling up this form:

- Use ball point pen to write in boxes using English capital letters or numeral.
- Do not make any stray marks on this Application form.
- Paste the photograph (recent passport size) within the box given.
- Xerox copies of marks sheets & certificates has enclose with the application form.
- Incomplete applications will not be accepted.

Note:

Please submit the completed application form by hand, registered / speed post or courier on or before date **10th August 2017** to the mentioned below address:

To,
Dean's Office
Room No-110, 1st Floor, Tower-4,
HealthCare Global Specialty Hospital
#8, P.Kalinga Rao Road,
Sampangiram Nagar,
Bangalore - 560027

Interviewed by:

In person / Teleconference

Name:

Signature:

Date: