RAJIV GANDHI INSTITUTE OF VETERINARY EDUCATION AND RESEARCH KURUMBAPET, PUDUCHERRY - 605 009

(A Government of Puducherry Institution) (Affiliated to Pondicherry University, Puducherry)

APPLICATION FOR ADMISSION TO M.V.Sc. DEGREE PROGRAMME, 2022-23

	ii. Incomplete and Late Applicat			qu pho	x recent good ality colour otograph with te background	
	ulars of Registration Fee:	DD M 1	D (<u> </u>	
Nam	e of the Bank & Place of Issue	DD Number	Date	9	Amount	
1.	Name (in BLOCK LETTERS): (As entered in School Certificate i) Date of Birth:		on 31.12	2.202	2:	
	ii) Place of Birth:	iv) District:				
		v) State:				
3.	Sex:					
4.	Nationality*:	(*Form "A" to be en	closed)			
	Aadhar Number:					
5.	i) Name of Parent/Guardian:					
	ii) Occupation and Annual Incor	ne:				
6.	i) Permanent Address:					
	ii) Address for Communication:	PIN:				

iii) Email ID:

iv) Mobile No.____

7.	•	sident of UT of Poyes, a Certificate (uducherry: Form C & D/E) to be e	Yes*/No enclosed					
8.	Tick the category against which you are applying: (Puducherry Residents – Enclose Form B for category ii, iv or v)								
	i. Genera	nl	ii. Other Backward Class iii. Economically Weak Sections (EWS)						
	iv. Most	Backward Class	v. Scheduled Ca		vi. Scheduled Tribes				
9.	Details of Ex	xaminations Passe	d*:						
	Name of the Examination Passed	Month and Year of Passing	Name of School/College	Name of the Board/University	Percentage of Marks/Grade Obtained				
	SSLC or Equivalent								
	HSC or Equivalent								
	B.V.Sc. & A.H.								
(*Enclose self at	tested copies of M	Iark Sheets)						
10. Employment Status: (If employed, Application should be forwarded through proper channel)									
	i. Post Held:								
	ii. Place of work:								
DECLARATION									
furr	ished in the Ap	plication Form an	y solemnly affirm that and the Enclosures there shall abide by the rules	eto submitted by me,	are true and no				
Pla	ce:								
Dat	e:		Signatu	re of Candidate					

FORMAT OF CERTIFICATES

(CANDIDATES MAY EITHER USE THESE FORMATS DIRECTLY OR TAKE PHOTOCOPIES FOR SUBMITTING NECESSARY CERTIFICATES ALONG WITH THE APPLICATION)

FORM-A: NATIONALITY CERTIFICATE Certified that Shri / Smt. / Kumari Son /wife / daughter/ ward of Shri / Smt. residing atis an Indian national. Place: Deputy Tahsildar / Tahsildar Date: Name of the Officer (Office seal) FORM-B: **CASTE CERTIFICATE** Certificate to be produced by the applicant belonging to OTHER BACKWARD CLASSES in support of his /her claim for the purpose of admission to educational institution and academic purpose This is to certify that Shri/Smt. / Kumari Puducherry belongs to..... community which is recognized as a Backward Class in the Union Territory of Puducherry vide Serial No as per the G.O. Ms. No.9-2001 - Wel. (SW-II) dated 19-02-2001 and published in the official Gazette of (i) Puducherry Vide Gazette No.29 dated 22.02.2001. G.O.Ms.No.13/2002 – Wel. (SW-II) dated 12.03.2002 and published in the official Gazette of (ii) Puducherry Vide Gazette No.13 dated 26.03.2002. G.O.Ms.No.26/2002 – Wel. (SW-II) dated 10.06.2002 and published in the official Gazette of (iii) Puducherry Vide Gazette No.117 dated 26.06.2002. G.O.Ms.No.56/2002 - Wel. (SW-II) dated 01.12.2003 and published in the official Gazette of (iv) Gazette No.....dated.... Puducherry Secretariat, Government of Puducherry, drawn up the list of other Backward Class based on the recommendation of the state level commission for backward classes. above mentioned place. Note: For residents of Puducherry UT, the caste certificate should be obtained only from Puducherry Authorities. Place: Date: Signature Name of the Officer Designation (Office Seal)

$Certificate \ to \ be \ produced \ by \ the \ applicant \ belonging \ to \ MOST \ BACKWARD \ CLASSES \ in \ support \ of \ his \ /her \ claim \ for \ the \ purpose$

1.	This is to ce	rtify that Shri/Sı	mt. / Kumari			
	Son / wife /	•	l of Shri. / Smt		In the Union Te	
			o		a Most Backward Class in the Union Te	erritory
	(i)	Puducherry			04 and published in the official Gaze	
		t./ Kumari ove mentioned p			and his / her family ordinarily res	side(s)
Econom	3. This certi	ficate is issued f	or the purpose of avail		in Educational Institutions and in Socio- nion Territory Administration.	
Note: F	For residents of	f Puducherry UT	T, the caste certificate	should be obtained or	nly from Puducherry Authorities.	
Place:						
Date:					Signature	
					Name of the Officer	
					Designation (Office Seal)	
G 4:6:					mentioned in information Bulletin.	
Certific	cate to be prod	luced by the ap	oplication belonging to	SCHEDULED CA	STE in support of his / her claimson / daughter of Shri.	/ Smt.
	This to certi	fy that Shri. / S	oplication belonging to	SCHEDULED CA	STE in support of his / her claim. son / daughter of Shri. of State / Unic	on
	This to certi	fy that Shri. / S	oplication belonging to	SCHEDULED CA	STE in support of his / her claimson / daughter of Shri.	on
	This to certi Territory Tribe under	fy that Shri. / S	oplication belonging to	Village / Town	STE in support of his / her claim. son / daughter of Shri. of State / Unic	on
	This to certi Territory Tribe under The Constru	fy that Shri. / Since the street of the stre	mt. / Kumari	Village / Towngs to the	STE in support of his / her claim.	on
	This to certiTerritory Tribe under The Constru The Constitute Const	fy that Shri. / Since the street of the stre	mt. / Kumari	Village / Towngs to the	STE in support of his / her claim. son / daughter of Shriof State / UnicScheduled Caste / Sch	on
	This to certi	fy that Shri. / Since the shade of the shade	mt. / Kumari	Village / Towngs to the	STE in support of his / her claim. son / daughter of Shriof State / UnicScheduled Caste / Sch	on eduled
	This to certing the Constitution of the Consti	fy that Shri. / Signature of Schedule attion (Schedule attion Act, 1960, the schedule attion (Schedule attion Act, 1960, the schedule attion (Jammu attio	mt. / Kumari	Village / Towngs to the	STE in support of his / her claim.	on eduled
	This to certing the Constitution of the Consti	fy that Shri. / Signature of Schedule attion (Schedule attion Act, 1960, the Areas (Reorganization (Jammu attion (Andaman	mt. / Kumari	Village / Towngs to the	STE in support of his / her claim.	on eduled
	This to certing the Constitution of the Consti	fy that Shri. / Signature of Schedule attion (Schedule attion Act, 1960, the Areas (Reorganition (Jammu attion (Andamanattion (Dadra anattion (Dadra a	mt. / Kumari	Village / Towngs to the	STE in support of his / her claim.	on eduled
	This to certing the Constitution of the Consti	fy that Shri. / Signature of Schedule attion (Schedule attion Act, 1960, the schedule attion (Jammu attion (Andamanattion (Dadra anattion (Dadra anattion (Puducher	mt. / Kumari	Village / Towngs to the	STE in support of his / her claim.	on eduled
	This to certing the Constitution of Constituti	fy that Shri. / Signature of Schedule attion (Areas (Reorganition (Andamanattion (Dadra anattion (Dadra anattion (Dadra anattion (Uttar Praattion (Goa, Darattion (mt. / Kumari	Village / Town stories) Order, 1951* tories) Order, 1951* d Tribes lists (modification Act, 1966, the Stand the Scheduled Caste Order, 1956 Scheduled Tribes Order, 1 duled Tribes Order, 1 duled Tribes Order, 1 Order, 1964* es Order, 1967* ed Castes Order, 1968	STE in support of his / her claim.	on eduled

2.		ed on the basis of the Scheduled Ca						
		of Villag	Father / mother of the father / mother					
	Division	of the State / Union Terr	itory	who belongs to the				
	Union Territory							
		(Name of the prescribed author						
	dated							
Place:		State / Union Territory	Sign	nature				
Date:				signation ith seal of Office)				
* Plea	se quote specific Preside	ential Order	`	,				
		FORM	І-С					
	INI	FORMATION TO BE FURNISHED PUDUCHERRY RESIDE						
Dec	claration by the applica	nt:						
1. 2.		al / French national of Indian origin ar UT resident based on the certificate for		r nationality*				
			Sign	nature of applicant				
Strike	out whichever is not app	licable.						
		FORM RESIDENCE CH						
1.		nt. / Kumarice in the Union Territory of Puducherr						
	Place:			outy Tahsildar / Tahsildar				
	Date:			me of the Officer:				
		OR		ffice seal)				
2. (a		Smt. / Kumari						
	continuously for five	examination in the years successive classes in the following re-						
S1. 1	No. Name of the	Institution	Dat From	e(s) attended To				
	1.							
	2.							
	Place:		Head of the Ir	nstitution last attended				
	Date:		(Office Seal)					
((b) Certified that the said the Union Territory of the certificate 2 (a) a	of Puducherry continuously for five ye		has resided in of study mentioned in				
	Place:			ldar / Tashildar				
	Date:		Name of the (Office Seal)					

3.	Certified that Shri. / Smt.	father / mother of Shri. / Smt. /	
		is an employee of Central / State Government /	
	Defence Personal / Central Paramilitary Forces /(a Public Sector undertaking wholly or substance)		
		e / she is presently posted and serving in Puducherry UT)	
5	since (Please indicate the date fr	rom which he / she has been serving in Puducherry UT).	
	Place:	Head of the Office	
	Date:	(Office Seal)	
		father / mother of Shri. / Smt. /	
	Kumarı		
	r arammeary Porce and was kined / disabled in action during	ig the year	
	Place:	Head of the Office /O.C of Unit	
]	Date:	(Office Seal)	
	C	OR .	
		father / mother of Shri. / Smt. /	
		Puducherry Government employee / Central Government	
		Which is a Public Sector Undertaking run wholly /	
	Puducherry Union Territory on	Administration and he / she died while in service in	
]	Place:	Head of the Office	
l	Date:	(Office Seal)	
	FOR	RM-E	
(a)	Certified that Shri. / Smt	Father / mother of Shri. / Smt.	
		is a Central Government servant / Defence	
		(a public sector undertaking wholly or substantially	
		and that he / she is presently posted in Puducherry Union rry who have declared any place in Union Territory of	
		ly document to prove that you have declared any place in	
	Puducherry as your home town (Enclose separate Puducherry as your home town).	ty document to prove that you have declared any place in	
	Place:	Head of the Officer	
	Date:	(Office Seal)	
	NATIVITY	CERTIFICATE	
(b)	This to certify that Shri. / Smt. / Kumari	son / daughter of Shri./	
		is native of this Union Territory by virtue	
	of continuous residence for years	/ birth vide birth Registration No	
	of Municipality / Commu	ine Panchayat.	
	Place:	Deputy Tahsildar / Tahsildar	
	.	N	
	Date:	Name of the Officer (Office Seal)	
		(Office Beat)	

FORM-F

Information To Be Furnished By Applicant Applying For Economically Weaker Sections Quota Seats

Government of......(Name & Address of the authority issuing the certificate)

INCOME & ASSEST CERTIFICATE TO BE PRODUCED BY ECONOMICALLY WEAKER SECTIONS

Certificate No			Date:		
	VALID F	OR THE YEAR			
This is to certify that Shri/Smt/R resident of, Territory Pin G since the gross annual income* of His/her family does not own or possible.	Code whos f his/her 'family'** is	e photograph is attesto below Rs. 8 lakh (Rup	ed below belongs to	o Economically Weaker Section	ions,
III. Residential plot of IV. Residential plot of 2. Shri/Smt/Kumari	1000 sq. ft. and above; f 100 sq. yards and abo f 200 sq. yards and abo son/daug	ove in notified municipove in areas other than ghter/wife of	the notified municip		as a
Recent Passport size attested photograph of the applicant	and Other Backward (Classes (Central List)	Signat	ture with seal of Office Name Designation	

^{*}Note1:. Income covered alt sources i.e. salary, agriculture, business, profession, etc.

^{**}Note 2:The term "Family" for this purpose include the person, who seeks benefit of reservation, his/her parents and siblings below the age of 18 years as also his/her spouse and children below the age of 18 years

^{***}Note 3: The property held by a "Family" in different locations or different places/cities have been clubbed while applying the land or property holding test to determine EWS status.

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ADMIT CARD FOR PGEE-2022

Examination Centre: Rajiv Gandhi Institute of Veterinary Education & Research,

Kurumbapet, Puducherry – 605 009 Date and Time of Examination: 10-01-2023, 10.00 a.m. Affix a recent good quality colour photograph with Name of the Applicant: 1. white background (in CAPITAL LETTERS) Address for Communication: 2. Signature of the Applicant: _____ 3. Note: Collect the approved admit card by 9.00 a.m. on 10-01-2023 at the Examination Hall, RIVER. (For office use only) Verified and found correct Signature of the Office In-charge