

अखिल भारतीय आयुर्विज्ञान संस्थान, मंगलगिरि, आंध्र प्रदेश  
**All India Institute of Medical Sciences**  
**Mangalagiri, Andhra Pradesh**  
[www.aiismangalagiri.edu.in](http://www.aiismangalagiri.edu.in)

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# PROSPECTUS

## Post-Doctoral Certificate Course [PDCC] July - 2024 session

**Last date of submission of application with requisite fee & documents via Mail  
15.06.2024.**

**Application Fees:**

**UR/OBC: Rs. 1500/- + Transaction Charges as applicable**

**SC/ST/EWS: Rs. 1200/- + Transaction Charges as applicable**

**PWBD: Exempted from any fee**

## IMPORTANT AT A GLANCE

Last Date for submission of Application	<ul style="list-style-type: none"><li>The duly filled-in application along with necessary documents and applicable fee should be sent via mail to <a href="mailto:examcell@aiimsmangalagiri.edu.in">examcell@aiimsmangalagiri.edu.in</a> on or before closing date of application.</li><li>Application received after the last date or incomplete in any respect or those not accompanied by the documents/information will not be considered.</li></ul>
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Post-Doctorial Certificate Course		
Submission of Application	Start Date: 16.05.2024	Closing Date: 15.06.2024
Issue of Admit Cards (Through E-Mail only)	23.06.2024	

Exam Date	Pattern of examination	Time & Duration	Exam Centre
02/07/2024	Written Examination (MCQ)	10.30 AM to 11.30 AM (60 minutes)	Examination Section, AIIMS Mangalagiri
02/07/2024	Practical assessment (OSCE)	02.00PM to 02.45PM (45 minutes)	Department of Anaesthesiology
	Practical assessment (Viva-Voce)		Department of Radio Diagnosis

**\*Note:** All applicants are hereby instructed to read the terms & conditions in the prospectus, including the eligibility criteria carefully before filling the form. All Candidates shall be provisionally allowed to write the examination (Stage-I). However, any discrepancy found later in the applications form shall debar you from appearing in the Stage-II of exam (Departmental Assessment) or Admission to the course as the case may be.

### REGISTRATION AND SUBMISSION OF THE APPLICATIONS:

Eligible candidates may apply and send the hard copy of duly filled application form via mail to [examcell@aiimsmangalagiri.edu.in](mailto:examcell@aiimsmangalagiri.edu.in).

<b>Sl. No.</b>	<b>CONTENTS</b>	<b>PAGE NO.</b>
<b>I</b>	<b>AN OVERVIEW</b>	04
<b>II</b>	<b>AIMS and OBJECTIVES</b>	04
<b>III</b>	<b>SUMMARY OF EXAMINATION PATTERN</b>	05
<b>IV</b>	<b>Post Doctoral Certificate Courses (PDCC)</b>	06-09
<b>V</b>	<b>DOCUMETS AND OTHERS</b>	10
<b>VI</b>	<b>APPLICATION FORM</b>	11-13
<b>VII</b>	<b>FORMAT OF OBC, SC/ST &amp; EWS AND SPOSNOSOSHIPCERTIFICATE</b>	14-17

## **AN OVERVIEW**

AIIMS Mangalagiri is one of apex healthcare institutes being established by Ministry of Health & Family Welfare, Government of India under Pradhan Mantri Swasthya Suraksha Yojna (PMSSY). With aim of correcting regional imbalances in quality tertiary level healthcare in country and attaining self-sufficiency in graduate and postgraduate medical education and training, PMSSY planned to set up new AIIMS institutions in underserved areas of country. These institutions are being established by an Act of Parliament on lines of original All India Institute of Medical Sciences, New Delhi which imparts both undergraduate and postgraduate medical education in all its branches and related fields, along with nursing and paramedical training, to bring together in one place educational facilities of highest order for training of personnel in all branches of health care activity. Institute awards MD/MS, MBBS, and B.Sc (Hons) Nursing degrees that are recognized by Medical Council of India/NMC. It also offers a one-year Post-Doctoral Certificate Courses (PDCC) in medical specialties.

## **AIMS & OBJECTIVES**

In field of Post-Doctoral education, most important function of Institute is to provide opportunities to train teachers for medical colleges in country in an atmosphere of research and development. Post-Doctoral students are exposed to newer methods of teaching and given opportunities to actively participate in teaching exercises. Other important objective of Institute is to bring together in one place educational facilities of highest order for training of personnel in all important branches of health activity and to attain self-sufficiency in postgraduate medical education. Educational principles and practices being adopted are best suited to needs of nation.

## SUMMARY OF EXAMINATION PATTERN

1.	Mode of Examination	<b>OMR</b>		
2.	Duration of Examination	<b>60 Minutes Stage I</b>		
3.	Location of Examination Centre	<b>Examination Section, AIIMS Mangalagiri</b>		
4.	Language of Paper	<b>English</b>		
5.	Type of Examination	<b>Objective Type</b>		
6.	Marking Scheme (Out of Total 70 Marks)	<b>Stage-I (50 marks of 60 minutes) Stage-II (20 marks for Departmental Assessment) No Negative Marking</b>		
7.	Type of Objective Questions	<b>Multiple Choice Questions (MCQs)</b>	<b>Pain Medicine</b>	<b>Anaesthesiology, Acute Pain &amp; Chronic Pain</b>
			<b>Cross Sectional Body Imaging</b>	<b>Cross Sectional Body Imaging, Gastro Radiology, Paediatric Radiology, Vascular Radiology, Breast Imaging</b>
8.	Distribution of Questions	<b>50 Multiple choice Questions (MCQs)</b>		
9.	Method of resolving ties	<b>Tie among aspirants will be resolved according to age (Date of birth); older candidate shall get preference over younger one.</b>		
10.	Type of Examination	<b>Practical assessment</b>		
11.	Duration of Examination	<b>45 Minutes Stage II</b>		

**Stage I: Written test carrying 50 marks of 60 minutes duration in subject candidate has applied for. Question paper will consist of 50 Multiple Choice Questions (MCQs).**

**Stage II: Out of candidates who have secured 50 percentile or more marks in written test (Stage-I), candidates 3 times number of seats advertised will be called for practical assessment (carrying 20 marks).**

**Final Selection: Final result will be declared based on total marks obtained in stage-I and stage-II Examination.**

## POST DOCTORAL CERTIFICATE COURSES (PDCC)

All India Institute of Medical Sciences, Mangalagiri invites application for Entrance Examination for admission in following Post Doctoral Certificate Courses (PDCC) July-2024 Session of AIIMS Mangalagiri.

### 1) NAME OF THE COURSE & NO. OF SEATS

Sl. No.	Name of the Course	Department	No. of seats
1.	PDCC in Pain Medicine	Anaesthesiology	02
2.	PDCC in Cross-Sectional Body Imaging	Radiodiagnosis	02

### 2) ESSENTIAL QUALIFICATION:

PDCC in Pain Medicine	MD/DNB in Anaesthesia recognized by Medical Council of India /NMC.
PDCC in Cross-Sectional Body Imaging	MD/DNB in Radiodiagnosis recognized by Medical Council of India /NMC.

### 3) UPPER AGE LIMIT:

Upper age limit is 45 years as on Last date of receiving application.

Upper age limit is relaxable for OBC Candidates by a maximum of 3 years.

Upper age limit is relaxable in case of SC/ST candidates by a maximum of 5 years.

Upper age limit is relaxable for Ex-Serviceman and Commissioned Officer including ECO, SSCO who have rendered or released on satisfactory assignment with age relaxation by a maximum of 5 years.

4) The persons with benchmark disabilities shall be given an upper age relaxation of five years for admission to PDCC for PWD candidates as per Right of persons with Disability Act, 2016.

### NOTE:

- For the purpose of application fee, the candidates belonging to SC/ST/OBC (NCL)/EWS/PWBD category, the candidate must possess a certificate issued by competent authority (as applicable to category/format provided by AIIMS Mangalagiri).
- OBC (NCL) certificate must be issued within one year of last date for application 15.06.2024 (i.e. issued between 16.06.2023 to 15.06.2024).
- EWS certificate should be issued on or after on 01.04.2024 to last date of filling of application form i.e. 15.06.2024 based on the income of year 2023-2024.

- d. ST/SC/PWBD certificate should be issued before the last of the application i.e. 15.06.2024

#### **5) DURATION OF COURSE:**

One (01) year. The tenure of training is one (01) year from the date of joining the course.

#### **6) REGISTRATION AND SUBMISSION OF THE APPLICATIONS**

Submission of application	Start Date: 16.05.2024
Closing Date of application	Closing Date: 15.06.2024
Issue of Admit Cards (Through E-Mail only)	23.06.2024

**Note:** Desirous candidates are instructed to submit the duly filled application form with the necessary documents as stated in the prospectus & application via mail to [examcell@aiimsmangalagiri.edu.in](mailto:examcell@aiimsmangalagiri.edu.in) on or before closing date of application form.

#### **7) SCHEME OF MARKING**

The question paper will consist of 50 Multiple Choice Questions (MCQs) of 1 hour duration. There is no negative marking. Scheme of marking will be as follows:

- Correct Answer: One mark (+1)
- Not answered: Zero mark (0)

#### **8) METHOD OF SELECTION**

The percentile scores will be used to determine eligibility for admission. The candidate must secure 50 percentile mark to be eligible for admission. Merit list will be prepared as per percentile score.

#### **9) METHOD OF RESOLVING TIES**

If two or more candidates obtain equal percentile score in the entrance examination then their inter-se-merit for admission to the course shall be determined on the basis of the following:-

- i. A candidate senior in age will rank senior to the candidate junior in age.
- ii. If the age is also the same, then a candidate who has obtained higher marks (Aggregate) in the MBBS examination will rank senior to a candidate who has obtained lesser marks.

## **10) JOINING**

Selected candidate is required to join on or before 15.07.2024. In any circumstances, last date for admission will not be extended. Candidates on the wait list who may be offered a seat if the selected candidates does not join.

## **11) LEAVE**

As per the senior residency scheme. Tenure will be extended and exams will be postponed only if total leaves exceed 30 days in 1 year.

**Maternity Leave** for Female Residents (PDCC) are entitled for maternity leaves as per Govt. of India rules during their course with full pay. Their period of registration/training will be extended for equivalent period. PDCC Candidate will have to work for extended period and final examination of candidate shall be held with next batch.

**Paternity Leave:** Male Residents (PDCC) are entitled for **paternity leave** as per Govt. of India rules.

## **12) EMOLUMENTS:**

Pay as applicable to Senior Residents under Residency Scheme of Government of India. However, sponsored candidates are not entitled for any Stipend /Emoluments.

## **13) HOSTEL ACCOMMODATION**

Candidates will be provided hostel subject to availability in lieu of House Rent Allowance.

## **14) MISCELLANEOUS INSTRUCTIONS**

- a) No TA/DA shall be paid for appearing in entrance examination or for joining.
- b) Number of seats/posts indicated in advertisement for various programs is provisional and subject to change without prior notice.
- c) Any attempt on part of a candidate to suppress facts, to provide false information or to influence selection directly or indirectly will be treated as a disqualification. If evidence of this surfaces after selection, services may be terminated and admission cancelled, even at that stage.
- d) Each selected candidate shall have to pay fee/dues within prescribed period, failing which his/her admission/appointment shall be cancelled.
- e) Selected candidates shall need to have present original documents (medical registration, date of birth certificate, certificates of educational qualification, experience and relieving and good conduct certificate from University/Institution last attended) for inspection and verification by Institute authorities and submit a self-attested copy of each at time of joining.
- f) Training programs are full-time and continuous, and private practice in any form after joining Institute is strictly prohibited. Any violation of this may leave to termination of appointment and cancellation of admission.



- g) Senior Residents admitted to Institute shall maintain good conduct, attend their classes regularly and abide by regulations/guidelines of Institute failing which their names are liable to be struck off rolls of Institute.
- h) Decisions taken by Director of Institute in all matters related to selection of candidates for admission to various courses shall be final and no appeal shall be entertained on this subject.

#### **15) PENALTY**

- Original certificates of all candidates will be retained in Academic Section at time of joining. Same will not be returned before completion of course unless he/she deposits a sum of Rs. 50,000/- (Rupees Fifty thousand only).
- If any candidate who joins PDCC and leaves said course within six months of joining, he/she shall be liable to pay a sum of Rs. 50,000/- (Rupees Fifty thousand only) and after six months shall be liable to pay a sum of Rs. 1,00,000/- (Rupees one Lakh only) as compensation for losses incurred by AIIMS due to such midstream departure. Salary for month in which his/her registration from course becomes effective, shall also stand forfeited.

#### **16) DISCLAIMER**

Contents of brochure are for information and guidance only, and not valid for any legal purpose. Although every precaution has been taken, Institute accepts no responsibility for any printing errors.

#### **17) DISPUTES**

All legal disputes are subject to jurisdiction of Guntur only

## **DOCUMENTS AND OTHERS**

### **1. DOCUMENTS TO BE ATTACHED WITH APPLICATION FORM:**

Copy of the self-attested Certificate

1. Date of Birth and Class X and XII Certificate
2. Medical Council Registration
3. Internship completion certificate
4. ST/OBC/EWS/PWBD certificate issued by the competent authority (If applicable)
5. MBBS Mark-sheets
6. MBBS Degree
7. MD/MS/DNB/Diploma Mark-sheets
8. MD/MS/DNB Degree/Diploma
9. Attempt certificates
10. Fee Receipt
11. Experience Certificate (If applicable)
12. Sponsorship Certificate (If applicable)
13. Copies of any other relevant documents

### **2. GENERAL INFORMATION REGARDING FEES**

Fee structure for PDC courses is as follows (in Indian Rupees):

<b>Particulars</b>	<b>Amount</b>	<b>Remarks</b>
Registration Fees	5,000	-
Tuition Fees	45,000	yearly
Enrolment Fees	1000	-
Degree / Diploma Certificate Fees	1000	-
Migration Certificate Fees	1000	-
Caution Money (Refundable)	20,000	-
Medical Subscription Fees	2,000	-
Library Fees	1000	-
Alumni Fee	2,000	-
Pot Fund	800	-
Recreation/Gymkhana Fee	150	-
Mess Security	1000	-
Hostel Security	1000	-
<b>Total</b>	<b>80, 950</b>	
Electricity Charges	-	Rs. 300/- per month or on actual basis (whichever is higher)

**Note:** Above fees are subject to revision from time to time by Institute and students admitted shall have to pay fees as may be decided by Institute.



**ALL INDIA INSTITUTE OF MEDICAL SCIENCES  
MANGALAGIRI, ANDHRA PRADESH  
EXAMINATION SECTION**

**APPLICATION FORM FOR PDCC COURSE, JULY 2024 SESSION**

<b>Applied for-</b>	<b>PDCC</b>		
	(Write Subject as per Prospectus)		
<b>Applied under:</b>	<b>Open (Yes/No)</b>	<b>Sponsored (Yes/No)</b>	
<b>Application Fee Details:</b>	<b>NEFT/RTGS No.</b> _____		
	<b>Bank Name:</b> _____		<b>Date:</b> _____
<i>(Please attach proof of payment)</i>			
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

*(Please tick (N) the appropriate category and attach attested copy of relevant certificate if seeking Reservation)*

<b>11 Educational Qualification (Medical)</b>							
<b>S. No.</b>	<b>Professional Education</b>	<b>Year of Final exam</b>	<b>Name of Institute</b>	<b>Name of University</b>	<b>Medals &amp; awards if any</b>	<b>Total percentage obtained/Pass</b>	<b>No of Attempt</b>
1							
2							
3							
4							
5							
6							

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

<b>12 Experience details (if applicable)</b>				
	Experience as	Name of Institute	From to	Remarks
1				
2				

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

### **Declaration**

I..... S/o/ D/o ..... do hereby declare and affirm that all the statements made in this application are true, complete and correct to the best of my knowledge and belief and nothing has been concealed thereon. In the event of any information being found false or incorrect or ineligibility detected at any point of time, my candidature shall be liable to be rejected without any notice.

I further declare that I fulfill all the conditions of eligibility regarding age limit, educational qualification and experience etc. prescribed for the course.

Date:-

**Signature of Candidate**

Enclosures: -

<b>Copy of the self-attested Certificate</b>	<b>Please tick (N)</b>
1. Date of Birth and Class X and XII Certificate	
2. MCI/DCI registration	
3. Internship completion certificate	
4. MBBS Mark-sheets	
5. MBBS Degree	
6. MD/MS/DNB Mark Sheets	
7. MD/MS/DNB Degree	
8. SC/ST/OBC/EWS/PWBD certificate issued by the competent authority (if applicable)	
9. Sponsorship Certificate (If applicable)	
10. Attempt certificates (If applicable)	
11. Copies of any other relevant documents	

**PROFORMA FOR OTHER BACKWARD CLASS (OBC) CERTIFICATE**

(ANNEXURE-1)

(Certificate to be produced by other Backward Classes applying for Admission to Central Educational Institutions (CEIs), Under Government of India)

This is to certify that Shri /Smt./Kum. \_\_\_\_\_  
Son/Daughter of Shri/Smt. \_\_\_\_\_ of  
Village/Town \_\_\_\_\_ District/Division \_\_\_\_\_ in  
\_\_\_\_\_ State belongs to \_\_\_\_\_ Community which is

recognized as a backward class under:

Resolution No. 12011/68/93-BCC(C) dated 10/09/93 published in Gazette of India Extraordinary part I Section I No. 186 dated 13/09/93.

Resolution No. 12011/9/94-BCC dated 19/10/94-BCC dated 19/10/94 published in Gazette of India Extraordinary part I Section I No. 163 dated 20/10/94.

Resolution No. 12011/7/95-BCC dated 24/05/95 published in Gazette of India Extraordinary part I Section I dated 25/05/95.

Resolution No. 12011/96/94-BCC dated 09/03/96.

Resolution No. 12011/44/94-BCC dated 06/12/96 published in Gazette of India Extraordinary part I Section I No. 210 dated 11/12/96.

Resolution No. 12011/13/97-BCC dated 03/12/97.

Resolution No. 12011/99/94-BCC dated 11/12/97.

Resolution No. 12011/68/98-BCC dated 27/10/99.

Resolution No. 12011/88/99-BCC dated 06/12/99 published in Gazette of India Extraordinary Part I Section I No. 270 dated 06/12/99.

Resolution No. 12011/36/99-BCC dated 04/04/2000 published in Gazette of India Extraordinary Part I Section I No. 71 dated 04/04/2000.

Resolution No. 12011/44/99-BCC dated 21/09/2000 published in Gazette of India Extraordinary Part I Section I No. 210 dated 21/09/2000.

Resolution No. 12015/09/2000-BCC dated 06/09/2001.

Resolution No. 12011/01/2001-BCC dated 19/06/2003.

Resolution No. 12011/04/2002-BCC dated 13/01/2004.

(xv) Resolution No. 12011/09/2004-BCC dated 16/01/2006 published in Gazette of India Extraordinary Part I Section I No. 210 dated 16/01/2006.

Shri/Smt./Kum. \_\_\_\_\_ and/or his family ordinarily reside(s) in the \_\_\_\_\_ District/Division of \_\_\_\_\_ State.

This is also to certify that he/she does not belong to persons/sections (Creamy Layer) mentioned in Column 3 of Scheduled to Government of India. Department of Personnel & Training O.M. No. 36012/22/93-Estt. (SCT) dated 08/09/93 which is modified vide OM No. 36033/3/2004 Estt. (Res.) dated 09/03/2004 or latest notification of Government of India.

Dated:

District Magistrate/Competent Authority Seal NOTE:

a) Term ordinarily used here will have same meaning as in Section 20 of Representation of People Act, 1950.

b) Authorities competent to issue Caste Certificates are indicated below:

District Magistrate/Additional Magistrate/Collector/Deputy Commissioner/Additional Deputy Commissioner/Deputy Collector/Ist Class Stipendiary Magistrate/Sub-Divisional Magistrate/Taluka Magistrate/Executive Magistrate/Extra Assistant Commissioner (not below rank of Ist Class Stipendiary Magistrate.)

Chief Presidency Magistrate/Additional Chief Presidency Magistrate/Presidency Magistrate.

Revenue Officer not below rank of Tehsildar.

Sub-Divisional Officer of area where candidate and/or his family resides.

**PROFORMA FOR SC/ST CERTIFICATE**

**Form of certificate as prescribed in M.H.A., O.M., No. 42/21/49-N.G.S. dated 28.1.1952, as revised in Dept. of Per-& A.R. letter No. 36012/6/76-Est. (S.CT), dated 29.10.1977, to be produced by candidate belonging to a Scheduled Caste or a Scheduled Tribe in support of his/her claim.**

**CASTE CERTIFICATE**

This is to certify that Shri/Smt./Kum.\* .....  
son/daughter\* of..... of village/town\* ..... in  
district/Division\* .....of State/Union Territory\* ..... belongs to  
.....Caste/Tribe which is recognised as a Scheduled Caste/Scheduled Tribe\* under:

- Constitution (Scheduled Caste) Order, 1950
- Constitution (Scheduled Tribe) Order, 1950
- Constitution (Scheduled Caste) (Union Territories) Order, 1951
- Constitution (Scheduled Tribe) (Union Territories) Order, 1951
- %1. (as amended by Scheduled Caste and Scheduled Tribes Lists (Modification) Order, 1956, Bombay Reorganization Act, 1960, Punjab Re-organization Act, 1966, State of Himachal Pradesh Act, 1970 North Eastern Areas (Re-organization) Act, 1971 and Scheduled Castes and Scheduled Tribes Orders, (Amendment) Act, 1976). Constitution (Jammu and Kashmir) Scheduled Caste Order, 1956.
- Constitution (Andaman and Nicobar Islands) Scheduled Tribes Order, 1959.
- Constitution (Dadra and Nagar Haveli) Scheduled Caste Order, 1962.
- Constitution (Dadra and Nagar Haveli) Scheduled Tribes Order, 1962.
- Constitution (Pondicherry) Scheduled Caste Order, 1964
- Constitution (Uttar Pradesh) (Scheduled Tribes) Order, 1967
- Constitution (Goa, Daman & Diu) Scheduled Caste Order, 1968.
- Constitution (Goa, Daman & Diu) Scheduled Tribes Order, 1968.
- Constitution (Nagaland) Scheduled Tribes Order, 1970.
- Constitution (Sikkim) Scheduled Caste Order, 1978.
- Constitution (Sikkim) Scheduled Tribes Order, 1978.

% 2. Applicable in case of Scheduled Caste/Schedule Tribe persons who have migrated from one State/ Union Territory Administration:

This certificate is issued on basis of Scheduled Caste/Scheduled Tribe certificate issued to Shri/ Smt\* .....father/mother of Shri/Smt/Kum\* ..... of village/town\* ..... in District/Division\* of State/Union Territory\* ..... who belongs to the .....caste/tribe which is recognised as a Scheduled Caste/Scheduled Tribe\* in State/Union Territory\* ..... issued by (name of prescribed authority) vide their No.....date.....

% 3. Shri\*/Smt.\* /Kum\* ..... and/or his/her\* family ordinary reside(s) in village/town\* ..... of State/Union Territory of.....

Signature.....

Place..... State/Union Territory

\*\*Designation.....

Date..... (With seal of Office)

Please delete words which are not applicable.

Please quote specific Presidential Order.

% Delete paragraph which is not applicable.

\*\* Should be signed by Authorities empowered to issue Scheduled Caste/Scheduled Tribe certificates as specified above.

**FORMAT OF SPONSORSHIP CERTIFICATE BY CENTRAL/STATE  
GOVT./ARMED FORCES (SPONSORING AUTHORITIES)**

1. I certify that Dr./Miss/Mrs./Mr.\* \_\_\_\_\_ is being sponsored for training leading to award of **PDC/Fellowship Course** at All India Institute of Medical Sciences Mangalagiri for session commencing in **July 2024**.
2. That Dr./Miss/Mrs./Mr.\* \_\_\_\_\_ is an employee of \_\_\_\_\_ (name of State/Central Govt. Dept./Office/Armed Forces/Competent Authorities of PSU/Autonomous Body etc.) for last three years.
3. That she/he will be granted leave for one (01) year in case of PDCC/Fellowship and two (02) years for Fellowship programme.
4. That he/she after getting training at AIIMS
5. will be suitably employed by sponsoring authority in speciality in which training is to be provided in All India Institute of Medical Sciences Mangalagiri.
6. That candidate will be paid all emoluments by sponsoring authority during entire training period. Such payment will not be responsibility of All India Institute of Medical Sciences Mangalagiri.
7. That candidate is being sponsored for entire duration of course as specified in prospectus for above mentioned course.

**Signature of** \_\_\_\_\_  
Sponsoring authority

**Date:** \_\_\_\_\_ **Name** \_\_\_\_\_  
(In BLOCK LETTERS)

**Place:** \_\_\_\_\_ **Designation** \_\_\_\_\_

**Office Seal** \_\_\_\_\_

\*Delete whichever is not required.

**IMPORTANT:**

- (i) **Above certificate, duly signed only by Competent Authority i.e. Secretary/Director General of Health Services of Central/State Government concerned/ DGAFMS/ Director/ Executive Head, will be considered.**
- (ii) No addition or alteration in above certificate is allowed.



**PROFORMA FOR ECONOMICALLY WEAKER SECTIONS (EWS)**

**CERTIFICATE**

Annexure-I

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

INCOME & ASSETS CERTIFICATE TO BE PRODUCED BY ECONOMICALLY WEAKER SECTIONS

Certificate No. \_\_\_\_\_

Date: \_\_\_\_\_

VALID FOR THE YEAR \_\_\_\_\_

This is to certify that Shri/Smt./Kumari \_\_\_\_\_ son/daughter/wife of \_\_\_\_\_ permanent resident of \_\_\_\_\_, Village/Street \_\_\_\_\_ Post Office \_\_\_\_\_ District \_\_\_\_\_ in the State/Union Territory \_\_\_\_\_ Pin Code \_\_\_\_\_ whose photograph is attested below belongs to Economically Weaker Sections, since the gross annual income\* of his/her "family"\*\*\* is below Rs. 8 lakh (Rupees Eight Lakh only) for the financial year \_\_\_\_\_. His/her family does not own or possess any of the following assets\*\*\*:

- I. 5 acres of agricultural land and above;
- II. Residential flat of 1000 sq. ft. and above;
- III. Residential plot of 100 sq. yards and above in notified municipalities;
- IV. Residential plot of 200 sq. yards and above in areas other than the notified municipalities.

2. Shri/Smt./Kumari \_\_\_\_\_ belongs to the \_\_\_\_\_ caste which is not recognized as a Scheduled Caste, Scheduled Tribe and Other Backward Classes (Central List).

Signature with seal of Office \_\_\_\_\_

Name \_\_\_\_\_

Designation \_\_\_\_\_



\*Note 1: Income covered all 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.