

## **OSMANIA UNIVERSITY ICR SUMMARY SHEET**

## MASTER'S DEGREE IN HOSPITAL MANAGEMENT (MDHM) FOR THE ACADEMIC YEAR: 2018 - 2019

CD.

## Instructions to fill the ICR Summary Sheet

- a. Do not staple, wrinkle, scribble, wet or fold this form.
- b. Use Black ball point pen to fill the form.c. Leave one box blank between surname and name.
- d. Write relevant codes in the boxes as applicable. e. Do not make any stray marks on this ICR form.
- f. Make sure that the letters/codes written should not touch the

Registration No. (For office use only)	

edges of the boxes.			
1. Name of the candidate [write in CAPITAL letters without touching edges of the boxes]			
2. Father's/Mother's Name [write in CAPITAL letters without touching edges of the boxes]			
D D M M Y Y Y Y			
3. Date of Birth 4. Fee paid Rs.			
Darken the appropriate circles below fully with <u>BLACK</u> ball point pen ●			
5. Category: OSC OST OOBC OBC-A OBC-B OBC-C OBC-D OBC-E OOthers			
or caregory. O be O bit O obe O be it O be it O be it O obe it.			
6. Residential Status: O Local O Non Local O Others (Other than A.P.)			
7. Sex: O Male O Female			
8. Name of the qualifying examination:			
(M.B.B.S., B.D.S., B.P.T., B.Sc., B.Com.,			
B.A., Others etc)			
9. Course name and code in which the candidate wants to write entrance test:  Code No.			
Course (to be filled by office)			
MASTER'S DEGREE IN HOSPITAL MANAGEMENT (MDHM) 4 5			
MASTER'S DEGREE IN HOSPITALMANAGEMENT (MDHM)  4 5			
10. Address for communication:  ( Write in CAPITAL LETTERS with Black ball point pen only )			
N. Company of the com			
Name:  Do not attest Passport size Photograph			
Address:  the photograph (Do not Pin/Staple the Photograph)			
Filotograph)			
PIN			
Mobile/Phone No.:			

12. Signature of the candidate (within the box given above)