

International Center for Cardiovascular & Thoracic Diseases (A Unit of Frontier Lifeline Pvt. Ltd.)

R 30 C, Ambattur Estate Road, Mogappair, Chennai - 600101.

Phone: 044 -49539500, 044 - 42017575

Email: academic@frontierlifeline.com

Website: www.frontierlifeline.com, www.frontiermediville.com

Courses Offered

(Tick in the required course box)

Affix Passport size Photograph

UG Course

The Tamil Nadu Dr. MGR medical University							
1	B.Sc Physician Assistant						
2	B.Sc Cardiac Care Technology						
3	B.Sc Cardio Pulmonary and Perfusion Care Technology						
	Hindustan University						
4	B.Sc Anaesthesia Technology						
5	B.Sc Cardio Vascular Technology						
6	B.Sc Perfusion Technology						

APPLICATION FOR ADMISSION

(To be filled by the candidate in English in his/her hand-writing. Study the prospectus before filling in the application)

1. NAME OF THE CANDI	DATE:									Ар	plica	ation	No:	•••••	
	(In)	full and	in blo	ck let	ters	as entered i	n H.S.C. cer	tificate)							
. Date of Birth						Age	in years):		Natio	nalit	y:				
3. Community O	c	BC/DI	NC	s	c/s	T Oth	ers	Spe	cify						
I. Religion & Communit	у														
5. Sex: Male	Fe	emale													
5. Physical Condition: No	ormal / Disa	bled	If	disa	ble	dVisi	on He	earing							
7. Blood Group:															
3. Details of Parents:															
A. Father Name:						- Phone N	o:		Em	ail Id	d:				
B.Mother Name: -						- Phone I	lo:		Em	nail I	d:				
D. Contact Details of A	applicant:														
Address for commu	nication:						Perman	ent Ad	dress:						
City:	Pin Code						City:		Pin Code						
State:				<u>. </u>		I	State:			1	ı				
Telephone Number Mobile Number			Email Id:												

	Subjects	Mark Obtaine	May Marks	Month/Yearof Passing	No of Attempts
	Details of Marks Obtained:				
	Medium of Instruction:				
_					
b. 1	Name of the Board of Education:	CBSE :	State Board IS	Others Specify .	
a. N	lame of the School / College with	address:			
_					
10.	Details of the School / College la	st Studied.			

	Subjects	Marks Obtained	Max Marks	Month/Yearof Passing	No of Attempts
Subject I					
Subject II					
Subject III					
Subject IV					
Subject V					
Subject VI					
Total					

INSTRUCTIONS

- 1. Please fill in with tick mark wherever applicable.
- 2. Applications must be complete in all respects. Incomplete Applications will be rejected.
- 3. In the case of students withdrawing from Programs after admission, **NO REFUND** OF FEES will be made by the Institution under any circumstance.
- 4. Xerox Copies of all mark sheets/certificates, self attested, to be attached.
- 5. Cost of Application form & Prospectus is Rs.1000/- to be paid by DD in favour of Frontier Lifeline Pvt Ltd.

Filled in Application may be sent to:

Academics
Frontier Lifeline Hospital
Dr. K.M.Cherian Heart Foundation
R- 30C, Ambattur Industrial Estate Road,
Chennai – 600 101.

IMPORTANT DATES:

	Last Date of receipt of completed application forms to be sent	: 10 th June, 2023
	Written test/interview dates	: 14 th June, 2023
	Date of reporting for admission/Orientation	: Aug 1 st Week, 2023
	Commencement of courses	: TBD
Declara	ation by the candidate:	
college	re that all the foregoing statements made in this application are true will be followed on admission. I accept that any statement made in this the application liable for rejection and admission, if granted on based.	application, if found incorrect on scrutiny, will
Date:		
Place:		
Signa	ture of Parent / Guardian	Signature of Applicant