

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

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

Phone: 044 - 495 395 00, 044 - 4201 7575

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				
7.	B.Sc Clinical Physician Associate				

### **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 CANDIDATE:	Application No:
(In full and in block letters as entered in H.S.C. certificate)	
2. Date of Birth Age (in years):	- Nationality:
3. Community OC BC/DNC SC/ST Others Specify	
4. Religion & Community	
5. Sex: Male Female	
6. Physical Condition: Normal / Disabled If disabledVision Hearing	
7. Blood Group:	
8. Details of Parents:	
A. Father Name: Phone No:	Email Id:
B.Mother Name: Phone No:	Email Id:

#### 9. Contact Details of Applicant:

Address for communication:						Permanent Address:						
City:	Pin Code						City:	Pin Code				
							•					
State:						State:						
Telephone Numb	er M	obile I	Num	ber			Email Id:					

 10. Details of the School / College last Studied:

 a. Name of the School / College with address:

 b. Name of the Board of Education: CBSE

 State Board

 ISC

 Others Specify

 c. Medium of Instruction:

d. Extra-Curricular Activities participated: Sports / NSS / NCC / Others (Specify): .....

#### 11. Details of Marks Obtained:

	Subjects	Marks Obtained	Max Marks	Month / Year of 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	: 20 <sup>th</sup> May, 2024
2023Written test/interview dates	: 27 <sup>th</sup> May, 2024
Date of reporting for admission/Orientation	: Aug 1 <sup>st</sup> Week, 2024
Commencement of courses	: TBD (As per University)

#### Declaration by the candidate:

I declare that all the foregoing statements made in this application are true and that the rules of the university and the college will be followed on admission. I accept that any statement made in this application, if found incorrect on scrutiny, will render the application liable for rejection and admission, if granted on basis of such incorrect information, will stand cancelled.

Date:

Place:

Signature of Parent / Guardian

**Signature of Applicant**