Application for Sponsorship for admission to The Christian Medical College, Ludhiana by The Malankara Orthodox Syrian Church, Catholicate of the East

		Recent Pa Size Photogra	-
1.	Name of Candidate (In Capital)		:
2.	Address for Communication with PIN	I code	:
3.	Phone No:		:
	- "		
	E-mail		:
5.	Sex		: Male /
6.	Date of Birth		:
7.	Name of Mother & Father		:
8.	Qualifying examination passed		:
9.	Reg No & Year of passing		:
10.	Extra-curricular activities during scho	ol years	:
11.	Church Activities		:
12.	Highest examination passed in Sunda	y school	:
13.	Any other relevant information		:
		Declarat	ion
l h	ereby declare that the information giv	en above i	s true to

Recommendation of the Parish Vicar

This is to certify that		, son of / daughter
of		is
a member of		Church,,
belonging to the Malan	kara Orthodox Syrian Church of which	His Holiness The Catholicos of the East
is the head and the regi	ster number of the family in the Paris	h register is
Place:	Church Seal	Name & Signature of Vicar
Please note:	rview for the sponsorship will be held	

- Kottayam 1. Please report at 09.30 am
- > Candidates can seek sponsorship of all courses for which they have applied.
- > Attach copies of Church Membership Certificate, Baptism Certificate and Domicile Certificate (Originals of these certificates shall be produced on 19.04.2016)
- Enclose a **Demand Draft** in favour of 'MGOCSM' for **Rs.700**/- (Rupees Seven Hundred Only) payable at Kottayam, being the application fee.

D D No	Date	Name of Bank & Branch	Amount

The filled-in application should be send to 'The General Secretary, MGOCSM, P.B.No 610, MGOCSM Student Centre, College Road, KOTTAYAM – 686001' on or before 15.04.2016

Sponsorship

for admission to The Christian Medical College, Ludhiana by The Malankara Orthodox Syrian Church, Catholicate of the East

HALL TICKET

		kegister No	(10 be fille	a by the office)
	Recent Photograph to be Attested by The Parish Vicar			
Name of Candidate (In Capital letters)	:			
Address	:			
Venue of Examination	: Baselius Col	lege, Kottaya	am – 686001	
Signature of the candidate	:			
			For Sponso	oring Committee

(Hall ticket will be issued to the candidates from 09.00 am onwards on the date of the Test at the Test Centre)

PLEDGE FORM

Pledge to be signed by every sponsored candidate and the Parent/Legal guardian

I realize that the Christian Medical College and Hospitals established to train doctors or paramedical personnel in the spirit of Christ for service in the relief of suffering and promotion of health. Keeping in mind this important objective, I realize that after training here I am expected to continue to serve in this spirit all my life. I understand that the service obligation agreement period of two (2) years for degree is fixed purely for practical considerations. After the service obligation agreement period I shall endeavor to continue to serve the church. During the training period I would be willing to help the sponsoring body in any way required of me, especially during my holidays. I shall also endeavor to be involved in the activities of the sponsoring body.

Name of the candidate (in capital letters) :	
Date:	Signature of Candidate
Address:	
I have read basic concept of sponsorship and uncoding the concept of sponsorship and u	
Signature of Father	Signature of mother
Date:	