

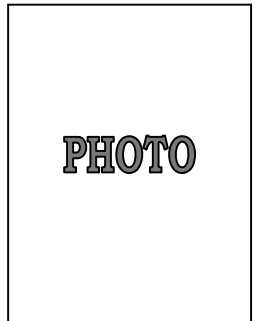
**APPLICATION FOR ADMISSION IN DNB (PSYCHIATRY)**  
**Vijayawada Institute of Mental Health and Neuro Sciences**  
 Ph. No. 0866- 2444999,0866 2432040 Fax: - 0866-2444999, E-mail: –  
[vimhans@gmail.com](mailto:vimhans@gmail.com)

DNB Course	Duration	No. of Seats	Eligibility Criteria
Psychiatry	3 years	2	M.B.B.S. CET of N.B.E.
	2 years	2	D.P.M.

Application completely filled should be sent to the Director, Vijayawada Institute of Mental Health and Neuro Sciences latest by 5<sup>th</sup>, January, 2011. Applications received late will not be considered. Attested photocopies of all the certificates should be enclosed with the application. Original certificates will be verified at the time of interview. The date and time of interview/aptitude test will be intimated to the candidate by e mail or post.

**FORMAT FOR APPLICATION**

1. Course Applied .....
2. Name .....
3. Age .....
4. Date of birth ..... (As shown in school certificate).
5. Father's/Husband's Name .....
6. Medical Council Reg. No. ....
7. Address for the correspondence. ....  
 .....
8. CET/primary NBE examination marks (where applicable).
9. Qualification.



Qualification	Aggregate	Subject wise marks	% of marks	University	Year of passing	Attempts	Distinction / awards, if any
M.B.B.S.							

10. Clinical experience after qualifying exam.
11. Research experience/papers.
12. Extracurricular activities.
13. Two References with their contact numbers and e mail addresses (For Post DPM Candidates only)
14. Contact Details including e mail address, mobile phone number and postal address
15. List of enclosures.
16. Signature of candidate

