TERNA PUBLIC CAHRITABAL TRUST'S

TERNA PHYSIOTHERAPY COLLEGE

Accreditation: Government of Maharashtra

Affiliated to Maharashtra University of Health Sciences, Nashik

Terna Medical College Campus, Sector-12, Phase-II, Nerul (W), Navi Mumbai-400 706

Ph.No. 91 22 27709813   Website : www.ternapt.ac.in   Email ID : ternaphysiotherapy@gmail.com

Paste your passportsize color Photograph

Please do not staple

MPT ADMISSION FORM
(Academic Year-2024-25)

Date : _____

MPT Subject _____

Name of candidate (IN CAPITAL LETTERS AS PER LAST QUALIFING EXAMINATION CERTIFICATE OR MARKSHEET):

_____   _____   _____
(Surname)   First Name   (Middle Name)

Name of the candidate (In Devnagari) MARATHI NAME :

_____   _____   _____
(Surname)   First Name   (Middle Name)

Mother Name of the candidate (IN MARATHI & ENGLISH) : _____

Address for   : _____

Correspondence :_____

_____

Address for   : _____

Permanent   : _____

_____

Student Mobile No. : _____ Email ID (Student) : _____

Parents Mobile No. : Father _____ Email ID _____

                            Mother _____ Email ID _____

Date of Birth (dd/mm/yy) : ____/____/_____   Birth Place : _____   Sex : Male / Female : _____

Nationality : _____   Country : _____   Domicile : _____

State : _____   Aadhar Card No. _____   Internship Complete Date_____

Degree : – Name of University :_____, Name of College : _____

Do You Have Voting Card? _____   Voter ID No.:_____   Admission Round : **CAP/Instt.**

Would You Like To Donate Organ : _____   Physically Handicapped : _____

Constitutional Category of Student : _____   Religiion _____   Sub-Caste of Student _____

Category of Admission : _____   Type of Quota : _____

Special Reservation (DEF/PWD/HA/MKB/OTHERS) : _____

Fathers/Guardian Occupation : _____   Fathers/Guardian Annual Income 2023-24 :_____

OTPT Registration No. _____

Student's Academic Information

Marks Obtained at BPTh Examination

Examination	University /Board	Total Marks/ Out of
I BPTh		
II BPTh		
III BPTh		
IV BPTh		

Marks Obtained at PGP -2024 Examination

Particulars	PGP–CET 2024
CET Roll No.	
Application Number	
Marks Obtained (Out of 100)	
Percentile	

List of Original Documents & Xerox copies (03 sets)*to be submitted along with admission form

(Also SCAN documents in pen drive (Soft copy) in PDF format (size up to 150 KB each documents) separately scan save file as per following names (Sr.No.1 to 25 only scan)

ENCLOSURES (IN SEQUENCE) :

Sr.No.	Documents	Yes/No	Sr.No.	Documents	Yes/No.
1	Online downloaded Application Form		14	Caste Certificate (If applicable)	
2	Copy of downloaded Admit Card (PGP-CET)		15	Caste Validity (If applicable)	
3	Aadhar Card (Scan original & submit xerox copy)		16	Non Creamy Layer Certificate valid upto 31/03/2025 (For (VJ) DT-A, NT-B,NT-C,NT-D,SEBC & OBC including SBC) (If applicable)	
4	PGP-CET – 2024 Mark sheet		17	Eligibility Certificate for EWS category issued by appropriate authority, for academic year 2024-25 (Govt.of Maharashtra - Annexure-A) (If applicable)	
5	Nationality / Domicile Certificate as Indian" on it		18	Affidavit for Education Gap Certificate (made by the student duly certified by the Executive Magistrate) (if applicable)	
6	SSC (or equivalent) passing certificate (for Date of Birth)		19	Migration Certificate issued by the respective University (Applicable to Non-MUHS students only)	
7	Marksheets of all years of Bachelor's course in B.P.Th.		20	Competent Authority Selection Letter	
8	Attempt Certificate of all examinations in BPTh course from head of institution		21	For person with disability (PWD) Candidates – Medical Fitness Certificate of Authorised Medical Board.	
9	Internship Completion Certificate (Up to 20/09/2024)		22	Orphan Certificate from appropriate authority.	
10	BPTh Passing & Degree Certificate		23	Copy of Gazette, Marriage Certificate 7 Affidavit in case of change in name (If applicable)	
11	Registration Certificate from respective Council		24	Voter ID (Scan original & submit xerox copy)	
12	Medical Fitness Certificate from a registered medical practitioner as per 2024 Brochure		25	Pass Port size Photograph (scan in jpg & submit 03 photos)	
13	College Leaving Certificate (LC/TC)		26	After retention Hemogram Report	

The information provided above is correct as per my knowledge, however if found incorrect, I will be responsible for the same.

Signature of the Student   **Signature of the Parent/Guardian**