



Bollineni  
Medskills  
(A Unit of Aditya Educational Society)

## Dr.B.R.AMBEDKAR UNIVERSITY – SRIKAKULAM

In collaboration with

### BOLLINENI MEDSKILLS (A unit of Aditya Educational Society),

GEMS Hospital Campus, Ragolu, Srikakulam– 532484

#### Notification for Admission into P.G. Courses(Healthcare) for the Academic Year 2024- 25

Dr.B.R.Ambedkar University, Srikakulam in collaboration with Bollineni Medskills (A Unit of Aditya Educational Society) offers the following P.G. courses. Applications are invited in the prescribed format for seeking admission.

1. Master of Healthcare Administration (2 Years) – 40 seats
2. P.G.Diploma in Medical Records and Health Information (1 Year) – 40 seats

**Eligibility:** M.B.BS, B.D.S, B.Sc., B.Pharmacy, B.Sc.Nursing / B.A.M.S/B.H.M.S, B.Sc. (All Streams)/B.A/B.Com/Any Degree pass.


**Age limit:** 20 to 35 years

These courses Classes and Practicals will be conducted at Bollineni Medskills, GEMS & Hospital Campus, Ragolu, Srikakulam-532484. Interested candidates are required to submit their application in prescribed format. Application Registration and Processing fee of Rs.250/- to be paid in favour of "Principal, College of Arts, Commerce, Law & Education, Dr. B.R.Ambedkar University, Etcherla, Srikakulam" through online payment on Dr. B.R Ambedkar university site. The Application, Prospectus and detailed information can be downloaded from Dr.B.R.Ambedkar University Website: [www.brau.edu.in](http://www.brau.edu.in) / [www.bollinenimedskills.in](http://www.bollinenimedskills.in) Candidates are required to submit their filled in Applications to the Office of the Director of Admissions, Dr.B.R.Ambedkar University, Etcherla, Srikakulam, A.P-532410 or Bollineni Medskills, GEMS Hospital campus, Ragolu, Srikakulam A.P – 532484 by post or in person.

For any information please contact: 7995013422 | 7680945357

Sale of Application: 01-08-2024  
Applications Last date: 30-08-2024

With late fee Rs.500/- last date: 04-09-2024

  
Academic Director 30/7/24  
Bollineni Medskills  
GEMS & Hospital Campus  
Ragolu, Srikakulam

  
Principal  
College of Arts, Commerce, Law & Education  
Dr. B.R. Ambedkar University  
Etcherla, Srikakulam

Asst. Principal  
Arts, Commerce, Law and Education  
Dr. B.R. Ambedkar University  
SRIKAKULAM-532410 (A.P.)



**Dr.B.R.AMBEDKAR UNIVERSITY, SRIKAKULAM  
ETCHERLA, SRIKAKULAM (A.P) - 532 410**

**Bollineni Medskills**

**Application for Master of Healthcare Administration – MHA (II Years)**

Affix recent PP Photograph with Sign. across photograph.

Registration No:

- 1. All the columns in the application form should be filled in with the candidate's own handwriting. Applications which are incomplete in any respect will be summarily rejected.
- 2. Enclose photocopies of all qualified certificates.

1. Name in Full : (Block Letters) SURNAME:

NAME:

2. Father's/Guardian's Name: .....

3. Aadhar Number :

4. E-Mail ID :

5. Mobile No. : .....

6. Address for correspondence:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
PIN: \_\_\_\_\_.

7. Name and Permanent Address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
PIN: \_\_\_\_\_.

8. Occupation of Parent/ Guardian: \_\_\_\_\_  
With Annual Income : \_\_\_\_\_

9. Date of Birth\* : 

D	D	M	M	Y	Y	Y	Y
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10. Sex (Put a ✓ mark) 

Male	<input type="checkbox"/>
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Female	<input type="checkbox"/>
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11. Reservation Category\* (Put a ✓ mark) 

SC	ST	OC	BC-A	BC-B	BC-C	BC-D	BC-E	Oth/Specify
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

12. Academic Qualifications\*:

Name of Institution	Place	Year of Pass	Gr./Perc.(%)	Class Obtained

13. Technical Qualifications\*:

Name of Institution	Place	Year of Pass	Gr./Perc.(%)	Class Obtained

14. State the reasons for seeking admission in to PGDMRHI.

15. Details of Payment of prescribed Application Fee :

Make Payment for Dr. B. R. Ambedkar University, Srikakulam – Payments [https://secure-ptg.payphi.com/pg/portal/pay/initiatePayOrder?merchantID=P\\_31551](https://secure-ptg.payphi.com/pg/portal/pay/initiatePayOrder?merchantID=P_31551)  
Dt..... **Amount In Rs. 250/- (Two Hundred fifty rupees only)**  
**Transaction no:** \_\_\_\_\_

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I declare that all the particulars given above are true and correct to the best of my knowledge and I will abide to all the Rules, Discipline and such other rules as may be prescribed by the University from time to time.

Station:

Date:

Signature of the Applicant



**Dr.B.R. AMBEDKAR UNIVERSITY, SRIKAKULAM  
 ETCHERLA, SRIKAKULAM (A.P) - 532 410**

**Bollineni Medskills**

**Application for PG. Diploma in Medical Records and Healthcare Information (I Year)**

Affix recent PP  
 Photograph with  
 Sign.  
 across  
 photograph.

Registration No:

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 \_\_\_\_\_  
 PIN: \_\_\_\_\_.

8. Occupation of Parent/ Guardian: \_\_\_\_\_  
 With Annual Income : \_\_\_\_\_

9. Date of Birth\* : 

D	D	M	M	Y	Y	Y	Y
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Male	<input type="checkbox"/>
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Female	<input type="checkbox"/>
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<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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