



NIZAM'S INSTITUTE OF MEDICAL SCIENCE
HYDERABAD, TELANGANA INDIA
Phone No. +91-40-23489189, 9490295019

1. Application form is available at NIMS Website www.nims.edu.in

Date: 30-10-2018 15:47:08 Last Updated: 30-Oct-2018 15:42:02 WebMail

Nizam's Institute of Medical Sciences
(A University Established Under State Act)
Hyderabad - 500082, Telangana, India

GET IT ON Google Play Apply Online NIMS MOBILE APP

Administration Hospital Services Academic Research Notifications Calendar-Events Contact Us Feedback RTI ACT

Patient Statistics

New OPD Reg.	: 919
OPD Revisit	: 481
OPD Repaid	: 590
New Emergency Reg.	: 33
Emergency Repaid	: 4
New Special Clinic Reg.	: 29
Special Clinic Revisit	: 4
Special Clinic Repaid	: 15

View All

Latest Updates

NIMS-Tender Notification for OP and P Record Files...

NIMS-Application Form for Observership/Peripheral Postings...

NIMS-Admission into BPT-3rd Counselling Vacant Seat...

NIMS-Admission into MPT-2nd counselling Vacant Seat...

NIMS-Selected Candidates List for...

View All

Online Provisional Registration Special Clinic Doctor Appointment Patient Lab Reports Patients Information Vendors Admissions/Notifications

2. Click on Apply online link

Date: 30-10-2018 15:47:08 Last Updated: 30-Oct-2018 15:42:02 WebMail

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NIZAM'S INSTITUTE OF MEDICAL SCIENCE
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3. Click on Register yourself link for new registrations

4. Select the course which you are applying for, by clicking on the button in # column against the course name.



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* Application should be filled as per SSC /10th Class

New Registration

Advertisement No. * Advertisement Date * Post Name *

Applicant Name

Date of Birth

Email Id *

Captcha * 7 A Q g 2 F

Advertisement Details

Total - 1 record(s)

Advertisement Sl. No.	Advertisement Number	Course/Post Name	Advertisement Date	Advertisement Last Date
2018-00007	RC/2018/entrance exam	Master of Physiotherapy(Academic 2)	15-Oct-2018	31-Oct-2018

☐ 2018-00007 Advertisement Number Search

* Mandatory Field(s).

5. After click on **OK** button

* Application should be filled as per SSC /10th Class

New Registration

Advertisement No. * Advertisement Date * Post Name *

Applicant Name

Date of Birth

Email Id *

Captcha * 7 A Q g 2 F

Advertisement Details

Total - 1 record(s)

Advertisement Sl. No.	Advertisement Number	Course/Post Name	Advertisement Date	Advertisement Last Date
2018-00007	RC/2018/entrance exam	Master of Physiotherapy(Academic 2)	15-Oct-2018	31-Oct-2018

☐ 2018-00007 Advertisement Number Search

* Mandatory Field(s).



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6. After filling all the details click on **Register** Button

NIZAM'S INSTITUTE OF MEDICAL SCIENCES

* Application should be filled as per SSC /10th Class.

New Registration

Advertisement No. *	RC/2018/entrance es	Advertisement Date *	15-Oct-2018	Course Name *	Master of Physiotherapy(Academic 2) v
Applicant Name	Salutation * Select Value v Name *				
Date of Birth	DD * DE v	MM * MM v	YYYY *	Mobile No. *	Confirm Mobile No. *
Email Id *				Confirm Email Id *	Social Status * Select Value v
Captcha *	12Mf 5L				


Register **Clear** **Login Page**

* Mandatory Field(s).

7. Enter all the details and click on **Register** Button



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Phone No. +91-40-23489189, 9490295019



NIZAM'S INSTITUTE OF MEDICAL SCIENCES

* Application should be filled as per SSC /10th Class.

New Registration

Advertisement No. *	RC/2018/entrance.e	Advertisement Date *	15-Oct-2018	Course Name *	Master of Physiotherapy(Academic 2)
Applicant Name	Salutation * Mrs. Name * asdasd				
Date of Birth	DD * 01	MM * 01	YYYY * 2000	Mobile No. *	9182542510
Email Id *	aswini.nims.set@gmail.com	Confirm Email Id *	aswini.nims.set@gmail.com	Social Status *	BC-A
Captcha *	12MFSL				

[Register](#) [Clear](#) [Login Page](#)

* Mandatory Field(s).

8. Copy the **Application number** Click on **login link**



NIZAM'S INSTITUTE OF MEDICAL SCIENCES

Dear Applicant,
You are successfully registered. Your Application Number is **10006201800151**. Please note this Application Number for future enquiries.
We have sent your login credentials on your registered Mobile Number and Email Id. Please login for filling Online Application Form.
Password is your date of birth format DDMMYYYY ex:05102000 for recruitment and entrance exam.
[Click here](#) for Login.



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9. Enter registration number and password is which sent to your mobile number ,enter captcha code and click on **login** button

10. **Submit Online Application: Applicant Details:** Click on Submit online Application , Enter all the mandatory details and click on **Save &**

Update button to save details

Note: Pan Number is non mandatory (you need not enter the number)



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Welcome Mrs. asdasd [Home](#) | [Logout](#) | [Change Password](#)

In case of any Issue/As:

Fill Below Steps to complete application

Step - 1
Submit Online Application

Step - 2
Update Payment Details

Step - 3
Upload Documents

Step - 4
View Filled Application Form

Advertisement Number : RC/2018/entrance exam
Advertisement Date : 15-Oct-2018
Advertisement Last Date : 31-Oct-2018
Course : Master of Physiotherapy (10006)
No. of days left for filling the application form : 2 days.

Disclaimer :
This website has been launched to provide the candidates and public-at-large, information about the online application/examination for NIMS Hyderabad. If you do not agree to the terms and conditions below, do not access this site or any pages thereof.

Terms and Conditions
No Warranty
The information and materials contained in the site, including text, graphics, links or other items - are provided on an "As Is" and "As Available" basis. Although, NIMS, Hyderabad Committee which organizes and conducts online application/examination, NIMS Hyderabad tries to provide information accurately it expressly disclaims liability for errors or omissions in this information and materials. No warranty of any kind, implied, express or statutory, including but not limited to the warranty of fitness for a particular purpose and freedom from computer virus, is given in conjunction with the information and materials.

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Network Services
The NIMS, Hyderabad cannot be held responsible for reduced access speeds due to bandwidth overloads especially close to the submission date.
The processing of applications will begin only after receiving confirmation page and fee.

Applicant Details

Academic Details

Address Details

Advertisement Details (Mandatory)

Advertisement Number* RC/2018/entrance exam Date of Advertisement* 15-Oct-2018
Application No. 10006201800151
Course Code* 10006 Application for the course Master of Physiotherapy
Date of entry 30-Oct-2018 04:24:05 PM Last Date of Receiving Application 31-Oct-2018
Department Academic 2

Preference of centers (Mandatory)

First Preference* NIMS Hyderabad

Language (Mandatory)

Mode of Language* English
State language or language you know:
a) To read and write: ☐ Yes ☐ No
b) To Speak: ☐ Yes ☐ No

Applicant Details (Mandatory)

Note: Details should be filled as per 10th class / SSC

Salutation * Mrs. Name * asdasd
Applicant's Name ☐ Father's ☐ Spouse's ☐ Mother's Name* Select Value
Dt. of Birth of Applicant* DD 01 MM 01 YYYY 2000 Age:(As on the last date)* Years 18 Months 11 Days 30
Social Status * BC-A Nationality * Indian
Gender* Select Value
Marital Status* Select Value Differently Abled ☐ only lower limb differently Abled accepted
Identification Mark 1 * Identification Mark 2
Pan Number
Place of Birth*
In service status : ☐ Yes ☐ No

Details of Parents/Spouse (Mandatory)

Name Age Occupation(if in service please mention Post/Designation & E Father Occupation Gross Monthly Income (Rs.)



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Mode of Language*

State language or language you know:

a) To read and write: ☐ Yes ☒ No

b) To Speak: ☐ Yes ☒ No

Applicant Details (Mandatory)

Note: Details should be filled as per 10th class / SSC

Salutation* Name*

☐ Father's ☐ Spouse's ☒ Mother's Name*

Dt. of Birth of Applicant* DD MM YYYY Age: (As on the last date)* Years Months Days

Social Status* Nationality*

Gender*

Marital Status*

Differently Abled ☐ only lower limb differently Abled accepted

Identification Mark 1* Identification Mark 2

Pan Number

Place of Birth*

In service status: ☐ Yes ☒ No

Details of Parents/Spouse (Mandatory)

Name	Age	Occupation (if in service please mention Post/Designation & Employer's name)	Gross Monthly Income (Rs.)
Father* <input type="text" value="aswini"/>	<input type="text" value="25"/>	<input type="text" value="software engineer at infosys"/>	<input type="text" value="11111111"/>
Mother* <input type="text" value="asdasd"/>	<input type="text" value="27"/>	<input type="text" value="software engineer"/>	<input type="text" value="22222222"/>
Spouse <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Save & Update

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11. Submit Application: Academic Details & experience Details: Enter all the mandatory details and click on **save & update** button

Applicant Details Academic Details Experience Details Address Details

Academic Details (Mandatory)

Qualification	Speciality	Name of the college & University	Month & year of passing the examination	MCI Recognition and Permanent Medical Registration	Marks Obtained	Max. marks in Obtained	Percentage of marks
<input type="text" value="M.Sc"/>	<input type="text" value="Biochemistry"/>	<input type="text" value="Andhra University"/>	<input type="text" value="2017"/>	<input type="text" value="201301"/>	<input type="text" value="950"/>	<input type="text" value="1000"/>	<input type="text" value="95.00"/>
<input type="text" value="B.Sc"/>	<input type="text" value="Biochemistry"/>	<input type="text" value="Andhra University"/>	<input type="text" value="2015"/>	<input type="text" value="201301"/>	<input type="text" value="472"/>	<input type="text" value="500"/>	<input type="text" value="94.40"/>

Particulars of qualification for CSI/UGC JRF-NET OR ICMR Junior Research Fellowship

Any specialized training received in India/Abroad

Awards/Recognition

Save & Update

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HMIS application will not be available between 03:15 PM to 03:45 PM due to maintenance

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12. Submit Application: Academic Details & experience Details: Enter all the mandatory details and click on **save & update** button

Fill Below Steps to complete application

Step - 1 Submit Online Application Step - 2 Update Payment Details Step - 3 Upload Documents Step - 4 View Filled Application Form

Applicant details saved successfully

Applicant Details Academic Details Experience Details Address Details

Details of Experience, if any

Sr No.	Post/Designation Held	Name of the organization and place of work	Date/Period From(DD-MM-YYYY) To(DD-MM-YYYY)	Total Period of work Yrs Mths Days	Head of institution/Organization
1	Professor	Andhra University	01-07-2017 25-02-2018	0 7 25	D. Ramarao

Details of Research Experience, if any

Sr No.	Name of Project	Guide	Type Of Project	Responsibilities	Outcome
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Details of Research Publications, if any

Sr No.	Name of Article	Authorship 1st/2nd/others	Type Of Article original/case report/review/CME proceeding	Journal National/International	Impact Factor	Citation Index
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Save & Update

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13. Click on Accept button and then save & update button click on preview & final save button.

Step - 1 Submit Online Application Step - 2 Update Payment Details Step - 3 Upload Documents Step - 4 View Filled Application Form

Applicant Details Academic Details Address Details

Address Details (Mandatory)

☒ Correspondence Address and Permanent Address are same

Correspondence Address

Address* adsasd
Country* India State* Telangana
District* Komaram B Pin Code* 555555
Ph No. Mobile No.* 9182542510
E-mail Id* aswini.nims.set@gmail.com

Permanent Address

Address* adsasd
Country* India State* Telangana
District* Komaram B Pin Code* 555555
Ph No. Mobile No.* 9182542510
E-mail Id* aswini.nims.set@gmail.com

Any Other Relevant Information adsasd

Declaration Details

1. I hereby declare that I am an Indian national and fulfill all the conditions of eligibility prescribed for the post applied. I have enclosed attested photocopies of certificates in support of my claim for educational qualifications, age, category (SC/ST/OBC/Ex. S.) and age relaxation.
2. I further declare that all statements made in this application are **true, complete and correct** to the best of my knowledge and belief. I understand that in event of any information being found suppressed/false or incorrect or ineligibility being detected before or after test/selection, my candidature/**appointment is liable to be cancelled without assigning any reason or prior notice. I also understand that in case of my final selection, my appointment will be provisional, subject to satisfactory police verification.**

☒ **Accept**

Save & Update **Preview & Final Save**

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Click on **Final Save** button



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Phone No. +91-40-23489189, 9490295019

Details of Parents/Spouse (Mandatory)				
	Name	Age	Occupation(if in service please mention Post/Designation & Employer's name)	Gross Monthly Income (Rs.)
Father *	aswini	25	software engineer at infosys	11111111
Mother	asdasd	27	software engineer	22222222
Spouse				

Intermediate Marks along with labs Details (Mandatory)				
Educational Qualification*	Bachelor of Physiotherapy			
Total Marks Obtained in B.R.T Examination	123	Out of: 130	Average: 0.9462	Percentage: 94.62 %
Date of Completion of Internship	25-Oct-2018			

Address Details (Mandatory)							
<input checked="" type="checkbox"/> Correspondence Address and Permanent Address are same							
Correspondence Address				Permanent Address			
Address*	adsasd			Address*	adsasd		
Country*	India	State*	Telangana	Country*	India	State*	Telangana
District*	Komaram Bheem	Pin Code*	555555	District*	Komaram Bheem	Pin Code*	555555
Ph No.		Mobile No.*	9182542510	Ph No.		Mobile No.*	9182542510
E-mail Id*	aswini.nims.set@gmail.com			E-mail Id*	aswini.nims.set@gmail.com		

Any Other Relevant Information: asdasd

Declaration Details

1. I hereby declare that I am an Indian national and fulfill all the conditions of eligibility prescribed for the post applied. I have enclosed attested photocopies of certificates in support of my claim for educational qualifications, age, category(SC/ST/OBC/Ex. S.) and age relaxation.

2. I further declare that all statements made in this application are **true, complete and correct** to the best of my knowledge and belief. I understand that in event of any information being found suppressed/false or incorrect or ineligibility being detected before or after test/selection, my candidature/**appointment is liable to be cancelled without assigning any reason or prior notice. I also understand that in case of my final selection, my appointment will be provisional, subject to satisfactory police verification.**

☒ **Accept**

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Cancel Final Save

14.Update Payment Details: Submit the fee of Rs.700/- (Rupees Seven hundred only) through online payment NET Banking/Credit Card/Debit Cards.
Click on **Pay** Button to Pay your application fee

NIZAM'S INSTITUTE OF MEDICAL SCIENCES

Welcome Mrs. asdasd Home | Logout | Change Password

Fill Below Steps to complete application

Step - 1	Step - 2	Step - 3	Step - 4
Submit Online Application	Update Payment Details	Upload Documents	View Filled Application Form

Payment Details	
Amount to be Paid (Rs.)	1
Payment Type *	Online Payment
Click to Proceed*	Pay

* Mandatory Field(s).



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Click on **Click to Confirm** button

Welcome Mrs. asdasd Home | Logout | Change Password

Fill Below Steps to complete application

Step - 1 Submit Online Application Step - 2 Update Payment Details Step - 3 Upload Documents Step - 4 View Filled Application Form

Payment Confirmation Page >>

Advertisement No. *	RC/2018/entrance exam	Advertisement Date*	15-Oct-2018
Application No.*	10006201800151	Applicant name*	Mrs. asdasd
Date Of Birth*	01-Jan-2000		
Vacancy Code *	10006	Application for the post of*	Master of Physiotherapy
Amount (in Rs.)*	1		
Amount in words (in Rs.)*	One Only		

Back Click To Confirm

* Mandatory Field(s).

Enter the details of card and click on **Make Payment** button to pay the fee



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BCE8487A254AB367E9CBC8CE68A8827C3A5E85118B1276DB20F9704273B9B752

English

Payment Information

Credit Card

Debit Cards

Net Banking

Wallet

Card Number

12345678978999

Expiry Date

Mar (03) 2031

CVV

576

Please enter valid card number.

I agree with the [Privacy Policy](#) by proceeding with this payment.

INR 1.00 (Total Amount Payable)

Make Payment

Cancel

ORDER DETAILS

Order #:

91

Order Amount

1.00

Total Amount

INR 1.00

Your payment request is being processed...

- This is a secure payment gateway using 128 bit SSL encryption.
- When you submit the transaction, the server will take about 1 to 5 seconds to process, but it may take longer at certain times.
- Please do not press "Submit" button once again or the "Back" or "Refresh" buttons.



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Click on **ok** button

Fill Below Steps to complete application

Step - 1	Step - 2	Step - 3	Step - 4
Submit Online Application	Update Payment Details	Upload Documents	View Filled Application Form

Payment Response Page >>

APPLICATION NO. :	10006201800151
PAYMENT DATE :	30/10/2018 16:50:28
PAYMENT AMOUNT :	1.0
BANK REFERENCE NO. :	920749
STATUS :	SUCCESS

Ok Click to go on next Step

15.Upload Documents:

- 1. Photograph : (Format: IF/JPG/JPEG/PNG) (Max Size:20 KB)
- 2. Signature : (Format:GIF/JPG/JPEG/PNG) (Max Size:10 KB)
- 3. Upload Mandatory Documents : (Format:PDF/DOC/DOCX) (Max Size:2 MB)



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Welcome Mrs. asdasd Home | Logout | Change Password

Fill Below Steps to complete application

Step - 1 Submit Online Application **Step - 2** Update Payment Details **Step - 3** Upload Documents **Step - 4** View Filled Application Form

Upload

Passport Photo * (Format:GIF/JPG/JPEG/PNG) (Max Size:20 KB) Signature * (Format:GIF/JPG/JPEG/PNG) (Max Size:10 KB)

Caste Certificate * (Format:PDF/DOC/DOCX) (Max Size:2 MB)

Mandatory Documents * (Select Value) (Format:PDF/DOC/DOCX) (Max Size:2 MB)

Documents Uploaded

S.No	Document Name	File Name	View	Remove
1.	SIGNATURE	signature10006201800151.jpg	✖	✖
2.	CASTE CERTIFICATE	AngularJS10006201800151.pdf	✖	✖
3.	10TH CLASS MARKS MEMO	AngularJS10006201800151.pdf	✖	✖
4.	PHOTOGRAPH	passport210006201800151.png	✖	✖

Document Upload & Final Save

* Mandatory Field(s).

16. Click on view Filled application and take printout and send the hard copy of the application form and attested documents (as per annexure of admission prospectus) on or before 5.00 pm of 12.07.2019 to below address:

Associate dean, academic-2, second floor, old OPD block, NIMS-Hyderabad-500082



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Phone No. +91-40-23489189, 9490295019

Welcome Mrs. asdasd Home Logout Change Password

In case of any Issue/Assistance needed, please reach to us/our team on 040-23489788 - Contact Timings:

Fill Below Steps to complete application

Step - 1 Submit Online Application Step - 2 Update Payment Details Step - 3 Upload Documents Step - 4 View Filled Application Form

Self attested hard copies of uploaded documents and filled application form should be submitted or send to Associate dean, Academic-2, second floor, old OPD block, Nizam's Institute of Medical Sciences, Panjagutta, Hyderabad-500 082, Telangana State, India.

View Filled Application View Application Status

Photograph Signature

Advertisement Details

Ad. No.	Ad. Date	Course Code	Course Name	Department
RC/2018/entrance exam	15-Oct-2018	10006	Master of Physiotherapy	Academic 2
Application No.	10006201800151	Last Date of Receiving Application		
Date Of Entry	30-10-2018 04:06:12 PM			

Preference of centers

First	Second	Third
NIMS		

Language

17. The candidate must write her / his name, application no and the course applied for on the backside of the Bank's Demand draft / NIMS cash receipt. Application fee is non-refundable even if the application is summarily rejected.



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- Incomplete and handwritten application forms are liable to be rejected. No correspondence will be made in this regard.
- Intimation of Counseling letters will be updated on www.nims.edu.in web site you are required to visit the web site for more information.
- For your application status and downloading of counseling letters. Please login with your registration number and password.