

Application form

Clinical Internship in Optometry

L V Prasad Eye Institute
Standard Chartered – LVPEI Academy for Eye Care Education
Kallam Anji Reddy Campus, Road no: 2, Banjara Hills, Hyderabad-500034, India

To be completed by the APPLICANT – Please fill in with CAPITAL letters only

1. Applicant's name as per the undergraduate marks sheet

2. Address for communication: _____

3. Permanent address:

4. Email ID: _____

5. Mobile: _____ Alternate number: _____

6. Preferred location for pursuing internship (please tick one centre)

Hyderabad

Vishakhapatnam

Vijayawada

Bhubaneswar

7. Academic details

Course of study	Year of passing	Name of school/college attended	Marks (%) or grade
SSC or 10 th			
HSC or 12 th			
Under- graduate			

Attach passport
size photograph

8. Under-graduate school/college information (please obtain consent from the faculty before providing the below details:

Optometry school/college name along with address	
Affiliated university	
Optometry in-charge/HOD name	
E-mail ID	
Contact number	

9. Participation in quiz, debate, poster/paper presentation, conferences, workshops:

Description	Date	Duration

10. Projects taken up/ involved:

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11. Extracurricular activities, if any:

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12. Languages you speak:

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13. Briefly state reasons for pursuing internship

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14. **Payment details:** please refer to below given instructions

Online transfer/NEFT details			
NEFT transaction number		Date	
Account holder name		Amount	
Bank name		Branch	

*Please save the copy of the online payment receipt for submission along with application form through email and for future reference.

Admission exam details

Last date of online application submission	Saturday, July 11, 2020
Date of online written exam	Wednesday, July 15, 2020
Online written exam time	10.00 -11.00am
After on-line application confirmation	Please check your emails regularly for updates on the admission exam. Prior to admission exam we will conduct a mock/practice exam 2-3 days prior to scheduled admission exam. The purpose of this exam is to make familiar with online exam platform.

Instructions for completing the application:

1. Application fee of INR 1000/- to be paid through online payment, bank details provided below.

Details for NEFT / Online Banking	
Beneficiary Name	Hyderabad Eye Institute
Bank Account No	0132030002300
Name of the Bank	IDBI
IFSC Code	IBKL0000028
Account Type	Savings
MICR Code	500 259 003
SWIFT Code	BKLINBB002
Branch Address	Road No. 2, Banjara Hills, Hyderabad, Telangana

2. Attached the scanned copy or screenshot of the application fee payment receipt along with application.
3. Attach the scanned copies of 10th and B. Optometry 3rd year or 6th semester marks/grade sheet along with application (If no 6th semester marks/grade sheet, please submit letter from the HOD that marks/grade sheet is not issued by the University. Also note that internship admission depends on the 6th semester result only).
4. Any incomplete forms (including failing to attach all above mentioned attachments) will be disqualified.
5. Please email the scanned application form along with fee receipt and above listed documents. Don't post/courier the hard copies.

Email the completed application form along with documents to:

bhiovs@lvpei.org

For any queries, please contact:

Mr Vijay Kumar Yelagondula

Office: 040 -30615802/05/07

Email: vijaykumar@lvpei.org