

# Application form

## Clinical Fellowship in Ophthalmic Techniques

L V Prasad Eye Institute  
Academy of Eye Care Education  
Kallam Anji Reddy Campus, Rod no: 2, Banjara Hills,  
Hyderabad-500034, India

[www.lvpei.org](http://www.lvpei.org)

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

1. Applicant's name as per the diploma certificate

\_\_\_\_\_

2. Address for communication: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Attach passport  
size photograph

3. Permanent address:

\_\_\_\_\_

\_\_\_\_\_

4. Email ID: \_\_\_\_\_

5. Mobile: \_\_\_\_\_ Alternate number: \_\_\_\_\_

6. Preferred location for pursuing fellowship (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 <sup>th</sup> |                 |                                 |                    |
| HSC or 12 <sup>th</sup> |                 |                                 |                    |
| Diploma                 |                 |                                 |                    |

(Attach all self attested copies of certificates)

8. Work experience

| Organization name | Date of joining | Current designation |
|-------------------|-----------------|---------------------|
|                   |                 |                     |
|                   |                 |                     |

9. Vision screening camps attended:

|  |
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10. Extracurricular activities, if any:

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11. Languages you speak:

|  |
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|  |
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12. Briefly state reasons for pursuing fellowship in ophthalmic techniques

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13. **Payment details:** please refer to instructions

|  |  |           |  |
|--|--|-----------|--|
| Demand draft (DD) number   |  | Bank name |  |
| <b>(Note: The candidate must write his /her name on the backside of DD.)</b> |  |           |  |
| Online transfer/NEFT details   |  |           |  |
| NEFT transaction number  |  | Date      |  |
| Account holder name  |  | Amount    |  |

### Important information:

|                                     |   |                        |                        |
|-------------------------------------|---|------------------------|------------------------|
| Last date of application submission | <b>04 May 2019</b>  |                        |                        |
| Date of admission exam              | <b>11 May 2019</b>  |                        |                        |
| Time for written exam               | <b>9.00-10.00 am</b>  | Time for clinical exam | <b>10.30am onwards</b> |
| Admission exam centre               | Brien Holden Institute of Optometry and Vision Sciences,<br>L V Prasad Eye Institute (LVPEI),<br>GPR campus, Near: Kali Mandir, Don Bosco Nagar (PO), Kismathpur,<br>Hyderabad-500 086, Telangana, India. Ph no: 040-30615802/05/07 |                        |                        |

### Instructions for completing the application:

1. Application fee of INR 1000/- to be paid through Demand Draft (DD) in the name of **“Hyderabad Eye Institute”** payable at Hyderabad and posted along with the application. For online fee payment see the below details, attach the transaction receipt along with application form.

| <b>Details for NEFT / Online Banking</b> |   |
|--|---|
| 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. Attach self attested copies of all the certificates (10<sup>th</sup>, 10+2 and diploma certificate)
3. Any incomplete forms (including failing to attach all above mentioned attachments) will be disqualified and not considered.

### Applications to be posted to below postal address:

|   |
|---|
| Mr Vijay Kumar Yelagondula<br>Brien Holden Institute of Optometry and Vision Sciences,<br>L V Prasad Eye Institute (LVPEI),<br>GPR campus, Near: Kali Mandir, Don Bosco Nagar (PO), Kismathpur, Hyderabad-500 086,<br>Telangana, India. Ph no: 040-30615802/05/07 |
|---|

### For any queries, please contact:

Mr Vijay Kumar Yelagondula  
Office: 040 -30615802/05/07  
Email: [vijaykumar@lvpei.org](mailto:vijaykumar@lvpei.org)