



**OSMANIA UNIVERSITY
HYDERABAD - 500 007**

**Application for Entrance Test and Admission into
Post M.Sc. Diploma in Radiological Physics : 2025-26**

Last date for submitting the application to the Director, Directorate of Admissions, Osmania University, Hyderabad - 500 007 is **20-11-2025 by 4.00 p.m.**

Downloaded application must be accompanied by an **Online Fee Payment** for Rs. **2000/-** "The Director, Directorate of Admissions, O.U., Hyderabad" towards the registration fee.

Note: The candidate should go through the information brochure before filling this form and ICR Summary Sheet in English

Affix recent photograph & sign across the photograph
(Do not pin/staple)

Particulars of the Online Payment Receipt:

(Please write your name and mobile number on the backside of the **Online Payment Receipt**)

UTR. No : Date : Amount :

Bank: Branch:

1. Name of the Candidate :
(in Capital Letters as entered in the qualifying examination)

2. Name of the Father/Mother:

3. Sex (Put a ✓ mark) ☐ Male ☐ Female ☐ 4. Whether Sponsored: Yes/No

5. Date of Birth

Day		Month		Year	

(Attach xerox copy of S.S.C. Certificate)

6. Residential status (Put a ✓ mark) ☐ Local ☐ Non-Local ☐

(see annexure-I of Information Brochure)

7. Reservation Category (Put a ✓ mark)

ST	SC-I	SC-II	SC-III	BC-A	BC-B	BC-C	BC-D	BC-E	EWS	Others
☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐

8. Particulars of Qualifying Examination:

Name of the Exam	Month & Year of passing	Subject	Division secured	% of marks

9. Address for Communication
(in Block Letters)

Pin Code _____ Phone No. _____

10. Particulars of study of preceding seven (7) years starting from the qualifying examination.

Course/Class	Year of study	School/College	Place & District
P.G. II Year			
P.G. I Year			
Degree III Year			
Degree II Year			
Degree I Year			
Inter II year			
Inter I Year			

11. Permanent Address

Pin Code _____ Phone No. _____

12. Declaration:

I hereby solemnly affirm that the above information is correct and I am aware that my admission is liable to be cancelled at any time in case any information is found to be incorrect. I have gone through and understood the Rules, Regulations and Instructions of the Entrance Test and Admission procedure.

Date : _____

Signature of the Candidate

CHECK LIST

Submit the following along with this application:

1. SSC Memo, Inter Memo, Degree Memo & PG certificate or Provisional certificate of qualifying examination.
2. Online Payment Receipt for Rs. 2000/-.
3. ICR Summary Sheet

Submit the filled in application to

Director
Directorate of Admissions
Osmania University, Hyderabad - 500 007
Telangana State, Phone : 83310 41286

Application Number _____

**DIRECTORATE OF ADMISSIONS
OSMANIA UNIVERSITY, HYDERABAD**

ACKNOWLEDGEMENT CARD

**Entrance Test and Admission into
Post M.Sc. Diploma in Radiological Physics- 2025**

Your Registration Number is _____
(Quote this number for any future correspondence)

for Director
Directorate of Admissions, O.U.



POST M.Sc. DIPLOMA IN RADIOLOGICAL PHYSICS : 2025



Instructions to fill the ICR Summary Sheet

- Do not staple, wrinkle, scribble, wet or fold this form.*
- Use **only black** ball point pen to fill the form.
- Leave one box blank between surname and name.
- Do not make any stray marks on this ICR form.
- Please make sure that the letters/codes written should not touch the edges of the boxes.

Registration No.
(For office use only)

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1. Name of the candidate [write in CAPITAL letters without touching edges of the boxes]

[illegible]

2. Father's Name [write in CAPITAL letters without touching edges of the boxes]

[illegible]

3. Date of Birth

4. % Marks at PG Level

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(Enclose a Photo Copy of 10th Std. Certificate)

Darken the appropriate circles ●

5. Category

- | | | |
|------------------------------|----------------------------|------------------------------|
| ☐ ST | ☐ BC-A | ☐ BC-E |
| ☐ SC-I | ☐ BC-B | ☐ EWS |
| ☐ SC-II | ☐ BC-C | ☐ Others |
| ☐ SC-III | ☐ BC-D | |

6. Residential Status

- ☐ Local
- ☐ Non Local
- ☐ Others (Other than A.P.)

7. Sex

- ☐ Male
- ☐ Female
- ☐ Transgender

8. Subject name and Code

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9. Address for communication:

(Please Write in Capital Letters with Black Ink only)

Name :						
PIN						
Mobile/Phone No.:						

Do not attest
the photograph

10. Affix your recent
Passport size Photograph
(Do not Pin/Staple the
Photograph)

**11. Signature of the candidate
(within the box given above)**