STATE INSTITUTE OF MEDICAL EDUCATION AND TECHNOLOGY (SI-MET) **BRANCH COPY**

CHALLAN FORM (CASH VOUCHER)

CHALLAN FORM (CASH VOUCHER)

CANDIDATE'S COPY

	Account No
at SRT Pet	

'ettah Branch (code - 70213) Trivandrum

Address	Candidate's Name
	Address :

District Pincode Date of Birth

Branch Code No# :

SBT Branch Name

Deposit Date

Bank charges Fee Remittance*

Rs.30/-

Total

Purpose

Application for the post of

Address:	Signature of Depositor

Fee receiving branch is advised to write branch code no. above * Rs.100/- for candidates belonging to General/OBC category and Phone / Mobile No. Rs.50/- for SC/ST category

STATE INSTITUTE OF MEDICAL EDUCATION AND TECHNOLOGY (SI-MET)

Account No

: 67130144345

at SBT Pettah Branch (code - 70213) Trivandrum

Address	Candidate's Name
• •	٠.

District Pincode

SBT Branch Name

Date of Birth

Branch Code No# :

Deposit Date

Bank charges Fee Remittance* Rs.30/-

Purpose

Application for the post of

Signature of Depositor Address:

Authorized Signatory

Stamp

Authorized Signatory

Stamp

Phone / Mobile No

* Rs.100/- for candidates belonging to General/OBC category and Rs.50/- for SC/ST category

Fee receiving branch is advised to write the branch code no. above (This part of the challan will be required to be submitted by the candidate along with the application form)