

Chettinad Academy of Research & Education
(Deemed to be University under Section 3 of the UGC Act, 1956)

Faculty of Allied Health Sciences
Chettinad Hospital and Research Institute

Offer letter for Provisional Selection to the M.Sc. Counseling Psychology Degree programme

Ref: PG2020FAHS0100222

Date: 24-09-2020

To

Ms. S MAHALAKSHMI
d/o M SHANKAR
NO 7A AYYAPA NAGAR 2ND
STREET, NANGANALLUR,
CHENNAI-600048

Dear Ms. S MAHALAKSHMI

I am pleased to inform you that based on your interest shown to M.Sc. Counseling Psychology degree programme, following the online counseling process, you have been provisionally selected for admission to M. Sc. Degree programme on the basis of merit for the academic year 2020-21, offered by the Faculty of Allied Health Sciences, under Chettinad Academy of Research & Education (Deemed to be University), Chennai, subject to the fulfillment of the eligibility criteria including a pass in the qualifying examination.

The programme fee for M.Sc. Counseling Psychology Degree programme is Rs.1,00,000/- per annum. However, the University is pleased to offer financial support by way of Fee Talent Merit Scholarship as mentioned below based on the performance in the qualifying examination.

Scholarship	Merits	Fee Waiver
Shri. Ramaswamy Muthiah Talent Merit Scholarship	60% and above	25%

The programme fee shall be intimated after the submission of original mark statement of eligible qualifying examination result documents at the time of physical reporting for verification.

This is only a provisional selection and in order to secure your admission, you are hereby requested to pay a sum of **Rs.10,000/-** (Rupees Ten Thousand only) as an advance towards programme Fee on or before **01-10-2020**. This offer letter will stand cancelled if the fee is not paid before the stipulated date.

Mode of Fee Payment:

1. Fee can be paid through Demand Draft in favour of "CHETTINAD HOSPITAL AND RESEARCH INSTITUTE", Payable at CHENNAI.

[OR]

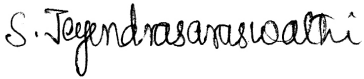
2. Online through Bank RTGS/NEFT Payment portal, details are given here below:

Name of the Bank	-	Axis Bank
Branch Name	-	Chettinad Health City Branch
Account in favour of	-	CHETTINAD HOSPITAL AND RESEARCH INSTITUTE
IFSC Code	-	UTIB0002784
Account No.	-	912010017697030

Please let us know at your earliest convenience whether you will be coming to study with us. We look forward to meeting you and to develop a sound partnership in learning for your future.

We congratulate and welcome you to the Faculty of Allied Health Sciences.

For Chettinad Academy of Research & Education (CARE)



REGISTRAR

Note:

You will be required to bring all the following original documents, on the day of physical reporting, the date and time of which, will be communicated to you in due course:-

1. Mark sheet of individual semester or consolidated
2. Course completion certificate / Provisional / Degree / internship certificates
3. Proof of Date of Birth (10th Marksheet) / Address proof (Aadhaar / Passport, etc.)
4. Transfer Certificate from the last institution
5. Conduct Certificate from the last institution
6. Community Certificate
7. Migration certificate (for other University / Institutes)
8. Certificate of Extracurricular activities (if any)
9. 3 copies of recently taken colour Passport size photographs

For any further query, please feel free to contact us at Tel: +91-9094732000;
e-mail: fahsadmission@chettinadhealthcity.com