

**CHALLAN FORM (CASH VOUCHER)**

BRANCH COPY



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

Account No : 67130144345  
at SBI Pettah Branch ( code - 70213 ) Trivandrum

Candidate's Name :  
Address :

District :  
Pincode :  
Date of Birth :

SBI Branch Name :

Branch Code No# :

Deposit Date :

Fee Remittance\* :  
Bank charges :  
Total :

Purpose { Application for the post of .....

Signature of Depositor  
Address: .....

Phone / Mobile No.

\* Rs.500/- for Asst Prof & Rs. 250 for Lecturer candidates belonging to General/OBC category and Rs.250/- for Asst Prof and Rs. 125 for Lecturer candidate belongs to SC/ST category  
# Fee receiving branch is advised to write branch code no. above

Authorized Signatory  
Stamp

**CHALLAN FORM (CASH VOUCHER)**

CANDIDATE'S COPY



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AND TECHNOLOGY (SI-MET)**

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

Authorized Signatory  
Stamp