



# CHRISTIAN MEDICAL COLLEGE VELLORE

## INTERNATIONAL PATIENTS REQUIRING MEDICAL VISA INVITATION LETTER



KINDLY DOWNLOAD

THE [AYUSH INFORMATION FORM](#), FILL IT OUT,  
AND SEND IT TO ANY ONE OF THE FOLLOWING:

✉ Email Id : [iro@cmcvellore.ac.in](mailto:iro@cmcvellore.ac.in)

or

📞 Whatsapp Number: 9498749969 / 9498749970

