Application No.	

## NIRMALA SADAN TRAINING COLLEGE FOR SPECIAL EDUCATION MUVATTUPUZHA - 686 661

## APPLICATION FOR ADMISSION TO B.ED SPECIAL EDUCATION [INTELLECTUAL DISABILITY] – SESSION 2023-2024

[IIVI ELLE	CIUAL DISABIL	11 1] – SESSION 202	23-2024
(I	Late application will	not be entertained)	
Name of the candidate (in	full block letters as	given in High School	Certificate)
Surname			
			A CC
Middle Name			Affix Photograph
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C'unt Ni un			
First Name			
Father's Name (in full blo	ck letters as given in	n High School Certific	eate)
Mother's Name			
	Ag	ge (in complete years )	
D ( CD' (I	1		
Date of Birth D D	M M	YE	A R
Complete Postal Address			s of Father/Guardian
Pin:			Pin:

Phone:

Fax

Fax:

Phone:

Nationality	Indian	Sex		Category					
J	Foreign		M F		SC	ST	SEBC	OEC	PH
					PH -	– Phy	sically Ha	andicapp	ed

## **Details of Qualifications**

Exam Passed	Name of the School/ College	Year of Passing	No. of Attempts	Class Division	Subjec t taken	% of marks	Medium of instruction
X/SSC							
Equivalent							
ISC/Sr. Sec/							
Intermediate							
10+2							
Equivalent							
B.Sc/BA/B.Com							
BMR/BRS(MR)							
B.R.S.C/BSW or							
other specify							
M.Sc/MA/							
M.Com or							
equivalent							
Any other							
Diploma/Degree							

Languages Known	Speak	Read	Write

1.

2.

3.

Extra-curricular activities

Have you worked with persons with Intellectual Disability? If yes give details.

State in your own hand writing "Why do you want to joint B.Ed. Spl. Edn. (ID) Course?

## The following documents should be attached with the application:

- 1. Attested photocopy of S.S.L.C. book to prove date of birth.
- 2. Attested photocopy of mark lists of plus two examination

Place:

- 3. Attested photocopy of mark list of all parts of qualifying examination. (Application without attested copies of all mark lists will be summarily rejected)
- 4. Attested photocopy of Degree certificate/Provisional certificate of qualifying examination
- 5. Attested photocopy of certificate from competent authority in support of special reservation (SC/ST/OEC/SEBC)
- 6. Attested copy of certificate by Medical board certifying that the candidate is a sibling or parent of child with Intellectual Disability.
- 7. Conduct certificate from Head of the Institution last attended. (In original)
- 8. Copy of the equivalency/Eligibility certificate stating that qualifying examination is recognized M.G. University for seeking admission to B.Ed Special Education (ID) course. (For those who have passed qualifying examination from other Universities/institutions outside of the State).

Date:	Signature of the Applicant
Ε	DECLARATION
to the best of my knowledge and bel	formation furnished in the application form are true lief. I have read the prospectus and satisfied myself ments prescribed. If admitted I promise to abide by institute and University.
Date :	Signature of the Candidate
I have fully read son/daughterinformation is fraudulent, He/She wil	And affirm that if it is proved that the
Date :	Signature of Father/Guardian