Application No.

NIRMALA SADAN TRAININGCOLLEGE FOR SPECIAL EDUCATION MUVATTUPUZHA -686661

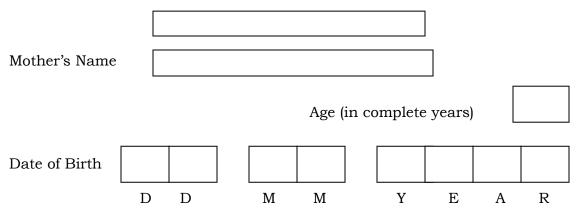
APPLICATION FOR ADMISSION TO D. ED IN SPECIAL EDUCATION (IDD) – SESSION 2024 -2025

(Late application will not be entertained)

Name of the candidate (in full block letters as given in High School Certificate)

Surname	Affix Photograph
Middle Name	Filotograph
First Name	(Colour photo with white

Father's Name (in full block letters as given in High School Certificate)



Complete Postal Address (in Block letters) (Please do not write your name of father name) Permanent Address of Father / guardian

Pin:

Pin:

Phone:



Only candidates having OH due to disability in one leg will

qualify.

Details of Qualifications

Exam Passed	Name of the	Year of	University	No. of	Class Division	Subject	% of	Medium
	School/	Passing	/Board	Attempts	Division	taken	marks	of
	College							instruction
X/SSC								
Equivalent								
ISC/Sr. Sec/								
Intermediate								
10+2								
Equivalent								
Higher								
Qualification								
a)								
b)								
- /								

Whether the candidate is a parent/sibling of a child with mental retardation:

Yes/No

Whether the candidates excelled in District/State/National/International /Sports or holder of NCC A, Scouts & Guides Governor Certificate? Yes/No

Languages Known	Speak	Read	Write
1.			

2.

3.

Extra-curricular activities

Have you worked with persons with mentally retarded? If yes give details.

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

The following documents should be attached with the application.

1. Statement of marks of PUC/Intermediate /Higher Secondary, (10+2) or other equivalent qualifying exam.

- 2. Attested photocopy of Proof of date of birth (10th Certificate)
- 3. Conduct certificate (Original)
- 4. Proof for SC/ST status or physically handicapped Certificate
- 5. Certificate Higher Qualification.
- 6. Certificate by a Government Medical Officer/Authority competent to issue certificate of disability designated by the State/Central Government certifying that the candidate is a sibling/parent of Mentally Retarded Children.
- Certificate to the effect that the candidate excelled in district/State/National/International Sports meet/NCC 'A' Certificate/Diploma in Fine Arts and Music, Yoga/Scouts & guides Governor certificate.

Place:

Date:

Signature of the Applicant

DECLARATION

I hereby certify that all the information given above is true and correct to the best of my knowledge and belief. Further declare that I shall abide by the rules and regulations of the institute and training center. I am aware that my admission will be cancelled in case the details furnished by me are proved to be wrong.

Date :

Signature of the Candidate

ENDORSEMENT BY FORWARDING AUTHORITY