NATIONAL INSTITUTE FOR EMPOWERMENT OF PERSONS WITH MULTIPLE DISABILITIES

(NIEPMD) (Divyangjan)

~Accredited by NAAC~ ~ISO9001:2015~

Department of Empowerment of Persons with Disabilities, Ministry of Social Justice and Empowerment, Govt. of India

ECR, Muttukadu, Kovalam Post, Chennai 603 112, Tamil Nadu

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DEPARTMENT OF SPECIAL EDUCATION

		Appl. Form No (office t	ıse)					
<u>Ap</u>	plication form for Direct Admission to Diplo	oma Level - D.Ed Special E	ducation (M					
	Academic Session	<u>1 2024-25</u>						
			Self attested photograph of applicant					
API	PLICATION FOR ADMISSION TO (Name of the Control of the Applicant:	-	ion (MD)					
2.	Name of the Parent/Guardian: a) Parents Name -Father b) Guardian's Name							
3.	Date of Birth (dd/mm/yy):Age in yea	rs & months:						
4.	Gender: Male / Female / TG	Marital Status:						
5.	Nationality:Domicile:	Mother Tongue	:					
6.	Whether belongs to North East States, If yes mention the State:							
7.	Category: Tick in appropriate place SC ST	OBC PwD] Gen					
	If PwD, mention Nature of Disability and Percentage							
8.	Whether Parent / Sibling/Ward of PwD, If yes Nature of Disability:							
	If yes, Mention UDID number or UDID enrolment No	ımber:						
9.	Do you belongs to EWS Category: Yes No							
10.	Aadhaar No:							
11.	Annual Family Income (from all sources):							
12.	Address for:							
	Correspondence	Permanent						
tate in cod	e							

Tel. No.
Email ID

13. Details of Examinations passed:

S. No.	Name of the exam passed	Name of the Board/University	Year of Passing	Total Marks	Marks Obtained	% obtained	Subjects	Certificate Number		
1.	SSLC/X						X			
2.	HSC/XII						X			
3.	Graduation									
4.	PG									
5.	Any other									
14. Whether Sports Person/ Cultural, If yes tick in the appropriate place District State National International 13. NEFT Banking Details Name : NIEPMD Internal Accural Bank : Indian Bank Branch : Kovalam Account No : 6332687300 IFSC Code : IDIB000K122 NEFT Payment . Ref. No										
<u>Declaration:</u>										
I hereby declare that all the information and documents furnished by me is true and correct to the best of my knowledge and belief. In the event of any information being found incorrect or misleading, my candidates be shall be liable for cancellation for admission by NBER, RCI or concerned training institute at any stage.										
Ap	Applicant's Signature:Parent/Guardian's Signature:									

* Note: Self attested copies of caste, educational qualification and UDID (PwD) certificate (if Applicable), mark sheets, Disability Certificate of self/family member, any other relavant documents to be enclosed along with the application form.