



**NATIONAL INSTITUTE FOR EMPOWERMENT OF PERSONS  
WITH MULTIPLE DISABILITIES (DIVYANGJAN)**



**Department of Empowerment of Persons with Disabilities (Divyangjan),  
Ministry of Social Justice & Empowerment, Government of India**

*(Recipient of National Award for Best Accessible Website for Persons with Disabilities 2011 &  
Outstanding Work in Creation of Barrier Free Environment for Persons with Disabilities 2012)*

**-Accredited by NAAC-**

**-ISO9001:2015-**

**East Coast Road, Muttukadu, Kovalam (Post), Chennai – 603 112, Tamil Nadu**

Application Form for Admission to

**M. Phil., Clinical Psychology  
(ACADEMIC YEAR 2021 – 22)**

**Recognized by:** Rehabilitation Council of India\*

**Affiliated to:** Tamil Nadu Dr. M.G.R. Medical University\*\*

- The candidates applying for M.Phil Clinical Psychology at NIEPMD(D) should obtain an 'Eligibility Certificate' from Tamil Nadu Dr. MGR Medical University. Visit the following link to apply eligibility certificate: <https://cms2.tnmgrmuexam.ac.in/#/EligibilityCertificateOnlineApplication>
- The candidates who could not obtain the Eligibility Certificate at the time of application must submit the same during the day of Entrance Examination.
- Candidates **without the Eligibility Certificate will not be permitted** to write the Entrance Examination.
- Any queries with regard to the Eligibility Certificate should be clarified directly from the Tamil Nadu Dr. M.G.R Medical University, Chennai.
- The date & mode of entrance examination and interview will be uploaded in the Institute's website.
- The filled application form should reach NIEPMD(D) by post or through email: [niepmdphilcp@gmail.com](mailto:niepmdphilcp@gmail.com) on or before **15<sup>th</sup> September 2021**.
- On completion of the scrutinization of the applications, the candidates eligible to appear for the entrance examination will be listed in the website.
- Apart from the rules and regulations of the Rehabilitation Council of India and the Tamil Nadu Dr. M.G.R. Medical University, the norms pertinent to the Institute will be at the discretion of the Director, NIEPMD(D).
- The candidates are advised to follow the NIEPMD(D) website on regular intervals for the updates.

***(Please do not attach this page during the submission of application)***

\* Awaiting for Extension Approval from the Rehabilitation Council of India, New Delhi

\*\*Awaiting for Continuance of Provisional Affiliation from the Tamil Nadu Dr. M.G.R. Medical University

Application No. \_\_\_\_\_  
(will be filled by office)

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**East Coast Road, Muttukadu, Kovalam (Post), Chennai – 603 112, Tamil Nadu**



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**M. Phil., Clinical Psychology**  
(ACADEMIC YEAR 2021 – 22)

**Recognized by:** Rehabilitation Council of India\*

**Affiliated to:** TN Dr. M.G.R. Medical University\*\*

The filled application form should be submitted on or before **15<sup>th</sup> September 2021**

The downloaded application form duly filled in should be sent to, The Director, NIEPMD or emailed to [niepmdphilcp@gmail.com](mailto:niepmdphilcp@gmail.com) with application fee of Rs.1500/- for General & OBC and Rs.750/-for SC/ST/PwD by the way of:

**Demand Draft** in favour of **The Director, NIEPMD-OR-** through the **NEFT Transaction**

Name	NIEPMD INTERNAL ACCURAL ACCOUNT		
Bank	Indian Bank	Branch	Kovalam
Account Number	6332687300	IFSC	IDIB000K122

Affix recent passport size photo of the candidate

Please fill the payment details as applicable:

DD No.  Bank  Date  Amount

**OR**

NEFT Transaction UTR No.  Date  Amount

1. Name of the Candidate (In full block letters as given in High School Certificate):

2. Mother's Name:

Father's Name:

3. Date of Birth:

  
D D  
M M  
Y E A R

Age (in complete years on 30<sup>th</sup> August 2021):

Gender:

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4. a. Permanent address:

(Please **do not** write your name or father's name here)

b. Address for correspondence

(Please **do not** write your name or father's name here)

Pin code:	Pin code:

Applicant's Mobile Number:

(with STD Code number)

Landline No. (Resi):

E-mail Address:

Mobile Number (Father):

(Mother):

5. Nationality:

Category (Please Tick):

ST	SC	OBC	General EWS	General
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Caste:

6. Are you a person with disability: Yes/No

If 'yes' – type of disability

% of disability

7. Details of Qualifications (attach copy of the certificates):

Exam Passed	Name of the School/College	University / Board	Year of Passing	Aggregate % of Marks	Subject Taken	Medium of Instruction
X / SSLC / Equivalent						
HSC / Sr.Sec / Intermediate / +2 / Equivalent						

Under-Graduation						
Post-Graduation / Integrated Program						
Higher Qualifications (if any)						

**Note:** It is mandatory for the candidates to produce all the above-mentioned original certificates for verification when demanded.

8. Work experience in the field of Rehabilitation (if any):

S. No.	Name and Address of the Employer	Nature of the Employment	From <i>(indicate the dates)</i>	To
1.				
2.				

9. Co-scholastic Achievements:

10. Please tick for the documents attached with the application: (Kindly attach the self-attested copies only)

1.	SSLC/10 <sup>th</sup> MarkSheet	
2.	Statement of Marks of Intermediate/Higher Secondary, (+2) or other equivalent qualifying exam	
3.	Statement of Marks of Under-Graduation	
4.	Degree Certificate of Under-Graduation	
5.	Statement of Marks of Post-Graduation	
6.	Provisional / Degree Certificate of Post-Graduation	
7.	Higher Qualifications (if any)	
8.	Transfer Certificate (TC)	
9.	Migration Certificate	
10.	Eligibility Certificate from Tamil Nadu Dr. M.G.R. Medical University* (For the candidates having passed the qualifying examination (M.A. / M. Sc., in Psychology / Applied Psychology / Counseling Psychology) from other than the Tamil Nadu Dr. MGR Medical University, Chennai.)  *Please refer the course prospectus for more details	
11.	Community Certificate (SC/ST/OBC etc.) <b>Note:</b> Candidates applying under respective category (i.e.,) OBC, EWS, SC, ST should attach appropriate certificate issued by the District Administration in the <b>Central Government format</b> . Non-submission of prescribed certificate will not be considered under the selected category and it will be considered under General Category.	
12.	Income proof of both parents for the EWS category (only for those who are applying in EWS category)	
13.	Experience in the field of Disability (if any)	
14.	Disability Certificate (if applicable)	

### DECLARATION

I hereby declare that the information given above is true and correct to the best of my knowledge and belief. I further declare that; I shall abide by the rules and regulations of the Institute. I am aware that my provisional admission will be cancelled, in case of the details furnished by me proved to be wrong.

Signature of the Applicant

Place:

Date: