



Avinashilingam Institute for Home Science and Higher Education for Women

(Deemed to be University under Category 'A' by MHRD, Estd. u/s 3 of UGC Act 1956)
Re-accredited with 'A' Grade by NAAC. Recognised by UGC Under Section 12 B
Coimbatore - 641 043, Tamil Nadu, India

Application for Admission to M.Ed. / M.Ed. Special Education (HI/VI) 2018 - 2019

Note : Application should be filled completely. Incomplete application will be rejected.

OFFICE USE ONLY		Please tick(✓)			
Reg. No.	Date	B.Ed. I Class <input type="checkbox"/>	II Class <input type="checkbox"/>	Others <input type="checkbox"/>	
Fee Rt. No.	Date	OC <input type="checkbox"/>	OBC <input type="checkbox"/>	ST <input type="checkbox"/>	
Name of the course applied for :		Affix Passport Size Photograph taken within a period of 3 months prior to submission of application Attach 2 extra Copies			
1. a. Name of the Applicant in full in English (BLOCK LETTERS) as in the X std Mark list / TC :					
b. Aadhaar Number :					
2. Age and Date of birth as in the X std Mark list / TC :					
a. Sex : Female <input type="checkbox"/>		TG <input type="checkbox"/>			
3. Place of birth Village / Town District State					
4. a) Nationality b) Religion c) Mother Tongue					
d) Jammu & Kashmir Supernumerary Quota Yes <input type="checkbox"/> No <input type="checkbox"/>					
5. Indicate whether you belong to OC/OBC/SC/ ST (✓) with caste. If belonging to OBC/SC/ST, an attested xerox copy of Community Certificate should be enclosed, (In case of OBC, recent certificate as per Government of India norms to be produced)		OC	OBC	SC	ST
6. Details regarding Parent / Guardian		Father	Mother	Guardian	
Father, Mother / Guardian's Name					
Occupation / Designation					
Annual Income					
Phone No.					
7. Address to which communication is to be sent :					
		Pin Code No. <input type="text"/>			
8. A. Are you Physically Challenged? : Yes / No					
B. If yes, State the nature of disability : (Attach Certificate) :					
C. Married or Unmarried :					
9. Programme Last Studied					
Qualifying Degree	University	Name of the College, Place & State last studied	Register No.	Month and Year of last appearance	

10. **Educational Particulars** (Strike out which is not applicable. Specify subject wherever needed enclose xerox copy)

Name of the Examination passed	Register Number	Month & Year of passing & Name of the University	Class	% of Marks/	Maximum marks Grades	No. of attempts
S.S.L.C.						
PUC / Higher Secondary / Pre-Degree						
B.A. / B.Sc. / B.Com./ Others						
Part I - Language						
Part II - English / Alternate Subject						
Part III - Main Subjects						
Ancillary I						
Ancillary II						
Any other Subject offered						

TOTAL MARKS FOR PART III (%)

M.A./M.Sc. (Major)						
B.Ed. (Optionals) 1.						
2.						

11. Is hostel accommodation required? Yes <input type="checkbox"/> No <input type="checkbox"/>	Address of local guardian	12. Languages known	Read	Write	Speak

13. **Extra curricular activities :**

Name of the Scheme NCC Red Cross NSS Girl Guides
 Sports : International National Inter University State Divisional District
 Others Specify (Enclose Photocopies of all sports certificates)

14. If you are sponsored by any Welfare Organisation, Industry or any other Organisation, give details.

	Name	Relationship	Year of Study	Course	Present Address
15. Mother, Sister, Aunt or any other relative who had studied in this Institution previously					

I declare that the particulars given above are correct. I have studied the rules specified in the Institution Prospectus and I agree to abide by the conditions specified therein, if selected.

Also, I declare that correct marks are furnished by me in the application form and I agree to abide by the conditions that if, after proper scrutiny of my marks, it is found that the marks furnished by me in the application form are not correct (i) I will forfeit the admission, no matter at what stage of the course I will be in at that time (ii) I may be debarred from pursuing the studies for a period of three years and (iii) legal action may be initiated against me for furnishing wrong marks.

I am aware of the law of ragging and agree to abide by the punishment meted out on me in case I am found guilty of ragging.

Station :

Date :

Signature of the Applicant

Signature of the Parent / Guardian

Application Form without attestation of marks by a Gazetted Officer will not be registered. Application and all correspondence should be addressed to the Registrar, Avinashilingam Institute for Home Science and Higher Education for Women, Coimbatore - 641 043. Please do not submit Original Certificates with this application form.