

Application No:



MOTHER TERESA WOMEN'S UNIVERSITY
Kodaikanal - 624 101
Ph: 04542-240772



Full Time - 2 Year Programme

Application for Admission to M.Ed Special Education (ID) - Women only

Approved by Rehabilitation Council of India-No:17-615/M.Ed.Spl.Ed (MR)/14/RCI

Reg. No :

(To be filled in by the Office)

Affix Photo unsigned
but attested by
Gazetted Officer

Indicate the Centre

Kodaikanal

Chennai

Madurai

1. Name of the Applicant in **BLOCK LETTERS**

Father's Name and Occupation

Mother's Name and Occupation

2. Address for Communication

.....

Pin

Telephone:

Mobile

Email ID:

3. Date of Birth -----

4. Married / Unmarried -----

5. Community ----- (SC / ST / MBC / DNC / BC / OC)

6. Reservation quota, if any, under which admission is sought

Differently Able Ex-Service Man

7. College from which Graduated

8. Extra-Curricular Activities interested:

Declaration

I declare that the particulars given above are true and that I shall, if admitted, abide the rules of the University.

Station :

Date : Counter Signature of the Parent / Guardian

Signature of the Candidate

FOR OFFICE USE (To be filled by Administrative Office)

Admission Granted: Yes / No

Date of Receipt:

Note:

Enclose the following **attested documents** along with **the Application Form**

EXCLOSURE: (Xeroxed)

1. Evidence for Date of Birth
2. Mark Statement for 10th and +2
3. Community Certificate
4. Transfer Certificate
5. Conduct Certificate
6. Consolidated Mark Statement for B.Ed Special Education
7. Provisional Certificate / Degree Certificate
8. Income Certificate
9. Aadhar Card
9. Bank Pass Book Front Page with IFSC and MICR Code

Note: If the application is downloaded, the application cost of Rs. 500/- should be added



MOTHER TERESA WOMEN'S UNIVERSITY
KODAIKANAL - 624 101



Hall Ticket for Entrance Exam

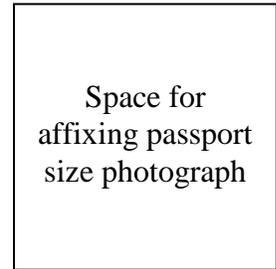
(Fill this and return it with the application)

Address of the candidate

Certified that the photograph affixed is of
Selvi.....
and she has signed in my presence.

Pin Code.....

Phone.....



Signature of the Candidate

Signature

Date:

Name, Designation and Address
of the Attesting Authority

To be filled by the University authority

Register No:

Place of Entrance Exam

Date:

Time:

REGISTRAR

- Note:** 1) Permission to appear for the Exam does not guarantee admission which will be decided on the conditions of eligibility given in the information to candidates, in addition to merit based on marks.
2) This should be preserved even after Entrance Exam and produced at the time of admission if, selected.