

Application	No:	
Application	140	

## Application Form for Admission to POST GRADUATE DIPLOMA IN EARLY INTERVENTION SESSION 2023-24

AFFIX PHOTOGRAPH HERE

P	JSI GRADU	SESSION 2023-24	HERE	
1.	Name of the Car	ndidate (In full block letters as given in High School Certificate):		
	Name			
	Surname			
2.	Father's Name (	In full block letters as given in High School Certificate):		
	Mother's Name:			
3.	Date of Birth	Age(in complete years as 31st Dec 2022)		
4. Present Postal Address (in block letters) (Please do not write your name or father name)				
		PIN: PIN:		
	Phone: E-mail:	Phone: E-mail:		
5.	Blood Group :			
6.	Nationality:	Foreign  Sex: M F Category: SC ST OBC G	en	
		Caste:		
	Religion:	Sub Caste:		
		Disability:		

7. 3	STATE	to which	the	candidate	belongs:
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8	Annual	Income	of self/	parent/c	ıuardian:
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9. Details of qualification:

Exam Passed	Name of the School/ College	Year of Passing	Subjects Taken	Percent- age of Marks	Medium of Instruction
X/SSC					
Equivalent					
HSC/Sr.Sec/					
Intermediate					
10+2 Equivalent					
MBBS/BMR or					
BRS(MR)/or					
B.Ed/(Spl. Edn)					
Or BPT/BOT/					
Speech Therapy or					
B.Sc.Nursing or					
Masters in Child					
Development/					
Child Psychology					
Any other Diploma/					
Degree					

10. Languages Known	Speak	Read	Write
1.			
2.			
3.			
4			

- 11. Co-curricular Activities:
- 12. Have you worked with persons with mental retardation? If Yes please give details
- 13. State in your own handwriting "Why do you want to join Post Graduate Diploma in Early Intervention course?"
- 14. Any history of major health problems with on going treatment of the student?
- 15. Please tick the documents attached with the application.
  - a). Statement of marks of MBBS/BMR or BRS(MR)/or B.Ed/(Spl. Edn) Or BPT/BOT/ Speech Therapy or B.Sc.Nursing or Masters in Child Development/ Child Psychology
  - b). Attested copy of SSC as proof of date of birth.
  - c). Attested copy of conduct certificate.
  - d). Proof for SC/ST/OBC/status.
  - e). Admit Card, Identity card & Envelope duly completed.

Place:	
Date:	Signature of the Candidate