

Serial No. _____



SWEEKAAR REHABILITATION INSTITUTE FOR HANDICAPPED

Door No. 6-3-24, First floor, 3/2 lane, Arundalpet, Guntur
Application Form for Admission to
B.Ed. SPECIAL EDUCATION (MENTAL RETARDATION)

SESSION _____

The filled in Application Form should be submitted on or before _____
The last date for sale of application is _____
The Entrance Examination will be conducted on _____

AFFIX
PHOTOGRAPH
HERE

Roll No.:

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

First Name

Surname

2. Father's Name (in full block letters as given in High School Certificate):

Age (in complete Years as on 31st Dec. _____)

3. Date of Birth

<input type="text"/>	<input type="text"/>
D	D

<input type="text"/>	<input type="text"/>
M	M

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Y	E	A	R

4. Present Postal Address (in block letters)

<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>

Permanent Address of Father/Guardian

<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>

::2::

PIN:

PIN:

Phone with STD code:

Mobile :

Fax:

E-mail:

5. Nationality :

Indian
Foreign

 Sex:

M	F
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 Category:

SC	ST	PH	OBC	Gen
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Caste :

Sub Caste:

Disability :

6. Details of qualification :

Name of the Degree	Name of the University	Year of Passing	Subjects	Percentage of Marks	Medium
X/SSC Equivalent					
HS/Sr.Sec/ Intermediate 10+2 Equivalent					
Graduation Please specify					

7. Languages Known

Speak

Read

Write

- 1.
- 2.
- 3.
- 4.

8. Co-curricular Activities :

9. Have you worked with persons with mental retardation ? If yes, please give details.

1. State in your own handwriting "Why do you want to join B.Ed. Spl.Edn.(MR) course ?"

10. Please tick the documents attached with the application.

- a) Attested copy of SSC as Proof of date of birth
- b) Statement of marks of BRS/BMR/B.Sc./BA/B.Com. or other equivalent qualifying examination.
- c) Attested copy of Under Graduate degree Certificate
- d) Attested copy of Transfer Certificate
- e) Proof for SC/ST status
- f) Certificate of Disability, if applicable
- g) Admit Card, Identify card & Envelope duly completed

Place :

Date :

Signature of the Candidate

DECLARATION

I hereby declare that all the information furnished in the application form is true to the best of my knowledge and belief. I have read the prospectus and satisfied myself that I fulfill all the eligibility requirements prescribed. In the event of being found ineligible even at a later date, I understand that I will be denied the opportunity to appear in the Entrance Exam. If admitted I promise to abide by the rules, discipline and norms of the Institute and University.

Date :

Signature of the Candidate

I have fully read the information furnished by my son / daughter / ward and affirm that it is true. I fully understand and endorse that if the information is proved to be fraudulent, he/she will be liable to any action as deemed fit by the Sweekaar Rehabilitation Institute for Handicapped / University.

Date :

Signature of Father/Guardian

Serial No. _____

Sweekaar Rehabilitation Institute for Handicapped

Door No. 6-3-24, First floor, 3/2 lane, Arundalpet, Guntur

IDENTITY CARD

Date & Time of Exam _____ at

Candidates are allowed to enter their room & occupy seats
15 Minutes before the examination.

Full Name :

Age on 31st Dec..... Sex: M/F.....

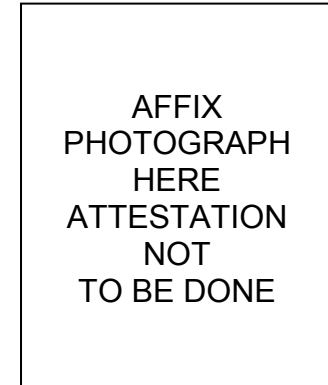
Course for Admission: **B.Ed Special Education (MR)**

Venue of Exam Centre

Roll No. :

Sign. of Candidate :

Sign of Exam Invigilator:.....



Serial No. _____

Sweekaar Rehabilitation Institute for Handicapped

Door No. 6-3-24, First floor, 3/2 lane, Arundalpet, Guntur

ADMIT CARD

Date & Time of Exam _____ at

Candidates are allowed to enter their room & occupy seats
15 Minutes before the examination.

Full Name :

Age on 31st Dec..... Sex: M/F.....

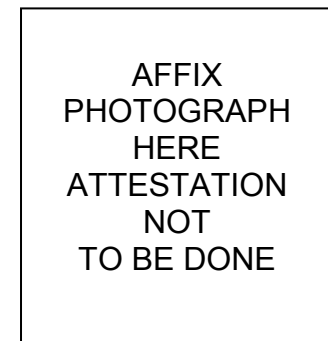
Course for Admission: **B.Ed Special Education (MR)**

Venue of Exam Centre

Roll No. :

Sign. of Candidate :

Sign of Exam Invigilator:.....



INSTRUCTIONS

01. The admit card must be shown to the Officer supervising the Examination.
02. A candidate without the valid admit card shall be debarred from the taking the examination.
03. This card should be preserved till the admission is over.
04. No traveling expenses will be paid for the journey for appearing in the Entrance Examination.
05. Violation of Instruction and adoption of any unfair means in the examination hall shall render a candidate liable for cancellation of his/her script and forfeiture of his/her claim for admission. Decision of the Officer Incharge of the Examination centre shall be final.
06. No Candidate shall be allowed or admitted to the Examination Hall half an hour after the commencement of the Examination. So also, no candidate will be permitted to leave the Examination Hall till the expire of atleast one and half an hour after the question paper has been given out .
07. No Candidate without the permission of the invigilator shall leave his/her sit in the middle of the Examination.
08. Strict silence should be maintained in the Examination Hall. Any Candidate found guilty of disorderly or improper behavior will be liable to expulsion from the Examination Hall.
09. Candidates are strictly prohibited from smoking in the Examination Hall.
10. Candidates should sign when required to do so by the invigilator.
11. Candidates are prohibited from writing their names on any part of answer book. They should write their Roll Number both in the question booklet as well as in the answer booklet.
12. Except marking on the appropriate place in the answer column nothing else should be written on the book. Rough work may be carried out on the blank pages provided for the purpose.
13. No sheet should be detached from the book. The book should be returned intact at the end of the examination.
14. Candidate should not leave the hall without handing over their answer books to the invigilator.
15. Candidates appearing at Entrance Examination of the Institute are under the disciplinary control of the Invigilator and are required to obey his/her instruction.
16. Use of Cell Phone during the examination is strictly prohibited.

Programme for B.Ed Spl. Education (MR)

Last Date for receipt of application form	:	_____
Date of Entrance Exam.	:	_____
Date of Counseling	:	_____
Commencement of classes	:	_____

