

## ALL INDIA INSTITUTE OF SPEECH AND HEARING, MYSORE 570 006

Manasagangothri, Mysore 570 006

## APPLICATION FOR ADMISSION TO B.Ed. Spl. Ed. (HI) PROGRAM

(Non-Entrance based program) **ACA-F-13** 

Affix attested			
photo			

1	Name of the candidate	
	(as given in 10 <sup>th</sup> Std. marks sheet)	
	F-412	
2	Father's name / Guardian's name	
	(if parents are not alive)	
3	Mother's Name	
4	Aadhaar Number	
5	Postal Address	
6	Mobile	
7	Email	
8	Date of Birth	Day Month Year
9	Gender	Female Male Gender neutral
	Gender	Temate Sender neutral
10	Nationality	Indian Foreign
11	Category under which you wish to	GM SC ST
	apply	OBC PH (Ortho)
		EWS
10	0.116	
12	Qualifying examination/s:	
	Total marks -	
	Marks obtained -	
	In percentage (%) -	
	If CGPA, equivalent to % -	
13	Degree Awarding University	

14	Enclose	List of enclosures
	1. Copies of the marks sheets of	1.
	each year / Semester of	2.
	examination of Degree	3.
	2. Degree Certificate	4.
	3. 10 <sup>th</sup> Marks Card	5.
	4. Relevant experience	
	certificate for claiming age	
	relaxation (for on deputation/	
	in-service candidates)	
	5. Caste/EWS/PWD certificate	
	as claimed	
	6. Aadhaar copy	
14.	Do you require hostel facility?	Yes No

Application Fees (For General/OBC/EWS-Rs.625/-; For SC/ST/PWD-Rs.400/-)

Paytm QR code:



Order No./Transaction Id:	Date:
Amount:	

## **DECLARATION**

I declare that the facts given above are true and correct to the best of my knowledge. I have read the terms and conditions of the program given in the prospectus.

Date:

Place:

Signature of the candidate

Please send the filled application to: *THE DIRECTOR*, *ALL INDIA INSTITUTE OF SPEECH AND HEARING*, *MANASAGANGOTHRI*, *MYSURU -570006* on or before **31.07.2022** by 05.00 pm.