

Appln No:



MOTHER TERESA WOMEN'S UNIVERSITY
KODAIKANAL624102

Phone No 04542 – 241685 E-mail: edndeptwu@yahoo.co.in

APPLICATION FOR ADMISSION TO M.Ed., COURSE

NCTE approved M.Ed Programme Ref No 2006 -07/6613 dt. 28.6.06

Reg. No.

(To be filled in by the Office)

Indicate the Centre

Kodaikanal **Chennai**
Madurai

Affix photo
Unsigned
But
Attested by Gazetted
officer

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

Father's Name and Occupation

Mother's Name and Occupation

2. Address for Communication

-----Pin-----

Phone No (**with STD Code**) ----- Mobile ----- E-mail ID -----

3. Date of Birth

4. Married / Unmarried

5. Community

1.SC 2.ST 3.MBC/DNC 4.BC 5.OC

6. Certificate shall be produced for Reservation quota, if any, under which admission is sought

Handicapped Ex-service Man

- 7.a) College from which graduated (B.Ed) :
- b) District in which the college is located :
- c) Teaching experience if any School / College :
- years of experience :

8. Level of Representation in Sports & Games : 1.State 2. District 3. University

9. Extra-curricular activities if any Prize winner in.....

10. Qualifying Degree Major

Put a in the appropriate box / item

11. a) Whether you have passed PG course Yes /No month & year
 If yes, month & year of passing

b) Whether you have passed M.Phil Course Yes /No month & year
 If yes, month & year of passing

c) Whether you have acquired Ph.D Degree Yes /No month & year
 If yes, month & year of passing

12. Do you need hostel Accommodation, if admitted Yes /No

DECLARATION

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

Station :

Date : Countersignature of
The Parent /Guardian

Signature of the Candidate

***MARK CERTIFICATE**

This certificate should be attested by a Gazetted Officer

Details of Marks obtained in any other Postgraduate Course : Subject-----

Semester. No.	Name of the Subject	Month & Year of Passing	Marks Obtained	Marks Maximum	Result Pass/Fail
I					
II					
III					
IV					
V					
VI					
	Total Marks				

Certified that the marks given above are correct

Date:
Place :

Office Seal

Signature of the Gazetted Officer
with Seal



MOTHER TERESA WOMEN'S UNIVERSITY
KODAIKANAL. 624 101

HALL TICKET FOR ENTRANCE TEST

(Fill this and return it with the application)

Address of the candidate

Pin

Code.....

Phone.....

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

Space for
affixing passport
size photograph

Signature of the Candidate

Date:

INSTRUCTION TO THE CANDIDATES:

- ❖ Download the Application
- ❖ Fill up the details
- ❖ Sign in the Application
- ❖ Attach the Photo Copy of SBI online receipt/DD Proof
- ❖ Send the soft copy of the Application to the following mail ID
admissionsection2011@gmail.com
- ❖ The original Application form (Hard Copy) along with DD and other enclosures should be sent to following address by post within 3 days.

The Registrar
Mother Teresa Women's University
Kodaikanal- 624101