

# RASS COLLEGE OF SPECIAL EDUCATION

Rashtriya Seva Samithi, Air -by -Pass Road, Annamaiah Marg., Tirupati -517501

Ph No. 08772244505, 2242404 & 99491 90711

Email-ID: rasscollegeofspecialeducation@gmail.com

## ACADEMIC SESSION -20 - 20

Self attested  
photograph of  
applicant

### APPLICATION FOR ADMISSION TO D.Ed.SE (MR) COURSE

1. D.D.No & Date----- Amount-----

Name of the bank-----

2. Name of the applicant: \_\_\_\_\_

3. Name of the Father & Mother/Guardian:

\_\_\_\_\_ &

\_\_\_\_\_

4. Date of Birth (dd/mm/yy): \_\_\_\_\_ Age in years & months : \_\_\_\_\_

5. Gender: Male/ Female/ Others \_\_\_\_\_ Marriage Status: \_\_\_\_\_

6. Aadhar - ID Number: \_\_\_\_\_

7. Nationality: \_\_\_\_\_ Domicile: \_\_\_\_\_

8. Category: SC  ST  BC  PH  Gen

9. Annual Family Income (from all sources): \_\_\_\_\_

10. Address for:

	Correspondence	Permanent
State		
Pin code		
Tel. No.		
Email ID		

11. Details of examinations passed:

S. No.	Name of the exam passed	Name of the Board / University	Year of Passing	Total Marks	Marks obtained	%age obtained	Subjects
1	SSC / X <sup>th</sup> Std.						
2	HSC / XII <sup>th</sup> Std.						
3	Any other						

12. Details of Participation in sports Activities ( If applicable Please attach the photo copy of Certificate)

Participation			
a) International	<input type="checkbox"/>	b) National Level	<input type="checkbox"/>
c) State Level	<input type="checkbox"/>	d) District Level	<input type="checkbox"/>
( Put Tick (√) Mark which is Applicable)			

**Declaration:**

I hereby declare that all the statements made by me in this application, to the best of my/our knowledge, are true, complete and correct. If found incorrect or false my candidature/ admission may be treated as cancelled at any stage.

Applicant's Signature: \_\_\_\_\_ Parent/Guardian's Signature: \_\_\_\_\_

**\*Note: Self attested copies of caste, domicile and income certificates, mark sheet etc should be enclosed with the application form.**

**Acknowledgement**

**RASS COLLEGE OF SPECIAL EDUCATION,**

Rashtriya Seva Samithi, Air -by -Pass Road, Annamaiah Marg., Tirupati -517501,  
**Ph No.** 08772244505, 2242404 & 9949190711, **Email-ID:** rasscollegeofspecialeducation@gmail.com

Received Application from \_\_\_\_\_ S/o/D/o/W/o \_\_\_\_\_

for admission to (Name of the Course): \_\_\_\_\_ for the academic session 2016-17.

Date: \_\_\_\_\_

Receiver's Signature




Please read the instructions available here before filling up the application

INSTRUCTIONS

**The following documents must be attached with the application is Mandatory.**

- Demand Draft Rs.300/- in favour of “**RASHTRIYA SEVASAMITHI D.Ed. and SE (MR) Payable at. Tirupati.**
- Recent Passport size photograph.
- Photo Copy of Aadhar
- Attested copy of proof of date of birth (10<sup>th</sup> Certificate).
- Attested copy of Intermediate / Any Open Degree (OC & BC 50% and SC & ST 45% should possess in above said qualifying exam).
- Proof of Category Certificates (EBC/BC/SC/ST )
- Proof of PH Certificate - If Yes
- Certificate of Higher Qualification (UG & PG).
- Proof of experience Certificate if already working in the field of Mental Retardation
- Attach attested copy of Medical Certificate of MR Child. If applicant - parent /Sibling
- Whether the Candidate is sponsored? If Yes  
( Attach endorsed certificate by higher Authority)
- Self-addressed postal stamp envelop (11cm X 22cm) with worth of Rs.10/-.

 The application should send the following address:

**RASS COLLEGE OF SPECIAL EDUCATION  
RASHTRIYA SEVA SAMITHI, AIR BYPASS ROAD,  
TIRUPATI-517501, CHITTOOR (DIST), Andhra Pradesh, India**