

## NATIONAL COLLEGE FOR TEACHER EDUCATION

IQBAL SQUARE, MEPRATHUPADY, VENGOLA P.O., PERUMBAVOOR, PIN -683 556

## APPLICATION FOR ADMISSION TO BEd. (Bachelor of Education) PROGRAMME FOR THE ACADEMIC YEAR 20.....-20.... Name of Subject: Photograph Name of the candidate (in block letters) 2 Expansion of initials **Nationality** Male/Female 3 Taluk District State 4 Place of birth Permanent home address with 5 Telephone No. Address to which communication should be sent Tel. No. Mob. No. e-mail: Name and address of parent or guardian (state relationship) Occupation and annual income of parent or guardian Name and address of Local Guardian, if any 10 Religion and Caste (candidates belonging to SC/ST/SEBC/OEC categories should attach the copy of relevant caste/ community/Non- Creamy Layer certificate)

Academic Qualifications: Statement of Marks/Grades Secured in the Qualifying Examination (Attach copies of the Mark lists/Certificates)

Name of Examination Passed	Name of University/ Institution	Subject	Marks/ CGPA Secured	Maximum Marks/CGPA	Percentage of Marks and Class Secured	Passing and
1. BA/BSc in						
2. PG in						
3. Other					₩.	

12	The period, if any, during which the candidate discontinued his/her studies, with reasons	
13	Achievement in sports and games/NCC/NSS (attach true copies of relevant certificate)	
14	Whether eligible for reservation under Physically Challenged category, if yes specify subcategory (Blind, Deaf, or OH)	Yes/No
15	Whether eligible for bonus marks under Jawan/ Dependant of Jawan category	Yes/No
16	Any other qualification or information	
f	Attach true copies of documents in the	1. S.S.L.C. Certificate
	following order (Please tick the relevant items)	2. Mark lists of qualifying exams
		3. Certificate of qualifying exams
		4. Caste Certificate (SC,ST, OEC)
		5. Income Certificate (SC,ST, OEC)
		5. Other Certificates/Documents, if any specify

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	DECLARATION	
carefully the instructions in the Noti for Teacher Education (Affiliated to I	hereby declare to the year	t National College
knowledge and belief and that in the	rmation given by me in this application are true, complete and correct event of any information being found false or incorrect or ineligibiling the can be taken against me by the Management of the National Co	lity being detected
	Name:	
	Signature:	
Place:		

Date: