POST-GRADUATE INSTITUTE OF BEHAVIOURAL AND MEDICAL SCIENCES

SANTVANA MANOPCHAR AVAM ANUSANDHAN SANSTHAN (P.) LTD

OPP. RAJKUMAR COLLAGE, SWAMI ATMANAND MARG, G.E.ROAD,

RAIPUR (C.G.) 492001

Affix Recent Colored Passport Photograph

APPLICATION – FORM 2018

FOR TWO YEARS MASTER OF PHILOSOPHY COURSE IN CLINICAL PSYCHOLOGY/PSYCHIATRIC SOCIAL WORK

Sir.

I want to join the Master of Philosophy course in Clinical Psychology/Psychiatric Social Work. (Strike out which doesn't apply).

My particulars are as below: (all details to be in block letters).

1. Name in full: (First name) (Middle name) (Surname) 2. Father's/Husband's Name: Female 3. Sex: Male (Strike out which doesn't apply) 4. Day Month Year 5. Nationality:6. Caste category – Gen/OBC/ ST/SC 7.

......Pin Code......

Email:

8. Educational Qualifications (M.A. Psychology/ Social Work or Sociology onwards):

Exam Passed	Institution attended	University	Year of Passing	Class/Division

- 9. Enclosures: (Photocopies)
 - i. Matriculation Certificate (for age proof).
 - ii. All mark sheets of Graduation.
 - iii. Mark sheets of M.A. previous and final.
 - iv. Degree certificate of M.A. Psychology/Social Work or Sociology.
 - v. Character Certificate from the Head of the Dept. / Institute last attended.
 - vi. College leaving certificate from the Head of the Dept./Institute last attended.

vi. Conege leaving certificate from the flead	of the Dept./montate last attended.
Date: Place:	(Signature of Applicant)
DECLARA	ATION
I have carefully read the instructions given in sincerely affirm that the statement made and infor- form are true and correct. If however, it is found the fraudulent, incorrect or untrue in material particular prosecution and my selection and admission to the	mation's furnished by me in the application nat any information furnished herein is ars; I realize that I am liable to criminal
Date: Place:	(Signature of Applicant)

IMPORTANT NOTICE

In case any candidate is found to have supplied false information or certificate etc. or is found to have concealed or withheld some information in his/her application form, he/she shall be debarred from admission.

Any other action that may be considered appropriate by the Director of the Institute may also be taken against him/her which may include criminal prosecution.

DIRECTOR

Post-Graduate Institute of Behavioural & Medical Sciences, Opp. Rajkumar College, Swami Atmanand Marg, G.E. Road RAIPUR-492001 (C.G.)

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