



Application No.

ALAGAPPA UNIVERSITY, KARAIKUDI-630 003

(A State University Accredited with 'A+' Grade by NAAC)

DIRECTORATE OF DISTANCE EDUCATION

APPLICATION FOR ADMISSION TO B.Ed. (TWO YEAR) PROGRAMME FOR ACADEMIC YEAR 2017-18

Use blue or black ball-point pen only for filling the form. Read the prospectus carefully before you start filling the form

1. Name of the candidate (in Block Letters) with initials at the end. (Each letter in each box)

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2. Name of the Father

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3. Name and Address for Communication (in Block Letters)

4.

Affix recently taken
Passport Size
Photograph attested
by the
Principal/Headmaster
of the school
concerned

PIN Code:

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Email :

Contact No:

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5. Date of Birth : Date

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 Month

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 Year

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6. Age :

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(Put a ✓ mark in the appropriate box for the columns 7, 8, 9 and 10)

7. Nationality : Indian Others 8. Sex Male Female Transgender

9. Community :

SC		SCA		ST		MBC/DNC		BC		BC (M)		OC	
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(Attested copy of Community Certificate should be enclosed)

10. Special Category: 1. Person with Disabilities 2. Ex- Service man 3. Any Other

(Attested copy of Special Category Certificate should be enclosed) (Write legibly)

11. Educational Qualification:

Examination Passed	School / College Studied	Board / University	Subject /Course	Year of Passing	Max. Marks Part III	Obtained Marks Part III	% of Marks Part III
S.S.L.C							
H. Sc.							
D.T.Ed./D.P.Ed./ B.P.Ed./M.P.Ed.,							
B.A /B.Sc./B.C.A / B.Com./ B.Litt.							
M.A/ M.Sc./ M.Com.							

* For calculating percentage in UG, Part III – Major and Allied subjects are to be considered. Give the accurate percentage and do not round off the fractions.

* Attested copies of the certificates should be enclosed.

12. Details of Teaching Experience (including present employment details):

Name of the School	Address	Recognition No. of the School	Designation (Teaching Position)	Period of employment		Total Years & Months
				From	To	

* Attested copy of experience certificates from previous institutions if any, to be attached.

13. Teaching Experience (in Completed Years): _____

I hereby declare that all the particulars given above are correct and I abide and agree to submit myself to all the Rules and Regulations of the University.

Station :

Date :

Signature of the Candidate

Note: Application Form should be directly sent to **the Director, Directorate of Distance Education, Alagappa University, Karaikudi - 630 003.**

PRESENT TEACHING EXPERIENCE CERTIFICATE
(To be provided by the Principal / Headmaster / Headmistress)

Affix passport size photo attested by the Principal / Head Master of the School concerned

This is to certify that Mr./ Ms. _____ has been working as Teacher in this school since _____. This school is a Government / Government-Aided / Unaided Educational Institution and is duly recognized by the Central / State Government.

(Recognition Number: _____)

Signature of Principal / Headmaster / Headmistress

Place: _____

Name: _____

Date: _____

Designation: _____

(Office Seal)

Address: _____

Check List

The following documents and particulars should be enclosed along with filled-in Application Form

- (i) Attested copy of the Certificates for Educational Qualifications, Transfer Certificate Community Certificate and Certificate for Special Category, if any
- (ii) Teaching Experience Certificate(s)
- (iii) **A Demand Draft for Rs.500/- drawn in favour of “Director, DDE, Alagappa University”, payable at Karaikudi** towards the cost of Application form which downloaded from website.