AND TY INDEXIMITY	Dr. S. R. Chandrasekhar Institute of Speech & Hearing, Hennur Main Road, Bangalore - 560 084 (A Project of Lions Club of Bangalore East) (Affiliated to Bengaluru North University, Recognized by Rehabilitation Council of India & B++ NAAC Accredited) Telephone / Fax: 080-25460405 / 25470037 / 25468470 Email: <u>college.srcish@speechear.org</u> , Web : www.speechear.org	Passport size photograph to be affixed
	APPLICATION FOR ADMISSION TO BASLP, PG Diploma (AVT), M.Sc (Audiology), M.Sc (Speech Language Pathology) BSc Psychology (Circle whichever is applicable)	
Cours	se selected:	
PERS	SONAL DATA	
1.	Full Name (in block letters) and Address	
Mobile	e:email id:	
2.	Date of Birth & AgeSex Nationality	
3.	Religion Category Caste	
4.	Mother tongue	
5.	Do you belong to SC/ST/BC? If so specify	
6.	Do you belong to Urban/rural area	
7.	Marital status	
		_
8.	Father's Name	
Occu	upation:Designation	
Offic	cial Address	_
Mobi	ile:email id	
Annı	ual Income:	_

Dr. S. R. CHANDRAG

9. Mothe	rs name
Occupation	Designation
Official Add	ress
Mobile:	email id
Annual Inco	ome:
10. Perma	nent address (if different from Sl.No 1)

11. Local Guardian Name & Address, Mobile and email id:

12. Educational Qualification starting from 10th [including additional courses Diploma /degree as applicable to the field]

Examination	Board/University	Institute	Year of	Class	Marks
		last	passing	obtained	obtained/Max
		studied			Marks

13. Languages known

Language	Speak	Read	Write

14.	Participation in extra -curricular activities
15.	Hobbies and interests
16.	Furnish 2 references of your previous institution
	a. Name Address Tel noEmail id
	b. Name Address
	Tel noEmail id

An Application form should be accompanied by the following

- 1. Copies of marks card and certificates of all the examinations passed
- 2. Character and Conduct Certificate from last studied institution
- 3. Those belonging to SC/ST/BC should produce certificate from the competent authority to that effect
- 4. Fitness Certificate and Transfer Certificate (of the previous course) to be submitted at the time of admission.

I declare that the facts given above are true and correct to the best of my knowledge

Date_____ Place_____

Signature of the candidate

Note: It is mandatory to fill all the details; else the application will be rejected.

In case any of the above statements made by the applicant are found to be false, the admission given to the candidate is liable to be cancelled and due action will be taken against the candidate

Signature of the candidate