



AIPSA – INSTITUTE OF TEACHER EDUCATION
A unit of COUNCIL FOR WELFARE OF SCHOOL EDUCATORS (Ltd.)
Affiliated to All India Private Schools Association, New Delhi, Reg. No – 165/IV/14

APPLICATION FORM FOR ADMISSION

(All the fields must be filled in upper case)

✓ Tick the Course Selected: MTTC/PPTTC/ B. Ed/ D. El Ed

Admission No :

1. Name of Candidate :.....

2. Name of Guardian :.....

3. Age :.....

4. Date of Birth :.....
(DD/MM/YYYY)

5. Gender : Male Female Others

6. Religion :.....

7. Category : SC ST OBC General

8. Postal Adress :.....

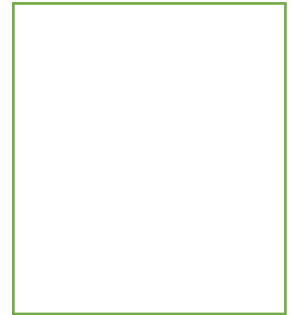
With Pin code :.....

9. Contact Number : 1.....

2.....

10. Nationality :.....

11. Adhaar Number :.....



Academic Record (Please enclose the documentary evidence for the entries in these columns)

Name of Examination	Board / University	Year of Passing / Appearing	Subject	Marks Scored	Max. Marks	Percentage (%)
High School / Equivalent						
Intermediate/Equivalent (10 th /+2)						
Graduation (Bachelor's Degree)						

DECLARATION

I hereby declare that all the particulars stated above have been filled in by me in my own handwriting and that the information given by me in the application form is true and no fact has been suppressed. In case of any information furnished by me is found wrong, my candidature for admission be cancelled outright without giving me any opportunity and further that any disciplinary action be also taken against me. I am ready to undergo for teaching practice and tuition classes under AIPSA which is a study cum tuition Centre of the course / University which I selected.

Name and signature

Of candidate

Place :

Date :

List the documents enclosed with the application form