

**INSTITUTE OF DISTANCE EDUCATION**  
**CETIFICATE/DIPLOMA/PG DIPLOMA - 2018-2019**

APPLICATION FOR ADMISSION

**ENROLMENT NUMBER** (to be assigned by the IDE office)

ACADEMIC YEAR 2018-2019

A 1 8

CANDIDATE TO FURNISH ALL THE REQUIRED PARTICULARS BELOW IN CAPITAL LETTERS

Candidate to tick (✓) any one of the appropriate boxes for Tuition Fee Concession (Certificate to be enclosed)

Differently Abled

Prisoner

Name of the Course applied for (put a (✓) in the appropriate box)

CERTIFICATE

DIPLOMA

P.G DIPLOMA

Name of the Certificate Course Applied for

Name of the Diploma / PG Diploma Course Applied for

Medium (Tick ✓)

TAMIL  ENGLISH

**PERSONAL CONTACT PROGRAMME CENTRE**

Centre Code

1

0

1

Place

CHENNAI

(ADDRESS FOR COMMUNICATION (WRITE IN CAPITAL LETTERS))

NAME : \_\_\_\_\_

Father's Name : \_\_\_\_\_

Door No. & Street : \_\_\_\_\_

Town / Village Post : \_\_\_\_\_

District : \_\_\_\_\_

State : \_\_\_\_\_ INDIA

Pin code No : \_\_\_\_\_

Father's Mobile No : \_\_\_\_\_

Registered Mobile No. : \_\_\_\_\_ E-Mail \_\_\_\_\_

Passport size  
Photo  
to be  
affixed

1. NAME OF THE APPLICANT  
(as given in the certificate in CAPITAL LETTERS)

(a) in English :

(b) in Tamil:

2. Father's Name

(a) Expansion of Initial

3. (a) Date of Birth as per Christian era

(b) Age

(c) Gender  
(Tick ✓)

Men

Women

Transgender

d) Aadhaar No :

4. Nationality

5. Religion

6. a) Community (Tick ✓)

b) Caste

7. Mother Tongue

OC  / BC  / MBC  / SC  / ST

8. Present Occupation, if employed :

9. Are you undergoing any other course in a College or University? If so, Specify

10. The wards of Defence Personnel / Ex-Servicemen should specify as :  
 (a) Ward of Defence Service Personnel  
 (b) Ward of Ex-Servicemen : Navy / Army / Air force.

**11. DETAILS OF EXAMINATION PASSED**

Examinations passed with Subjects	Name of the		Month & Year of Passing	Registration Number	Class with Grade / Marks	Maximum Marks
	School / College	Board / University				
<b>S.S.L.C. / 10<sup>th</sup> Std.</b> Strikeout whichever is not applicable (State Whether it is <b>One Year</b> or <b>Two Years</b> Course)						
<b>P.U.C. / Higher Secondary</b> Strikeout whichever is not applicable (State Whether it is <b>One Year</b> or <b>Two Years</b> Course)						
<b>Diploma Course</b> Strikeout whichever is not applicable (State Whether it is <b>Two Years</b> or <b>Three Years</b> Course)						
<b>Name of the Degree passed</b>						

**12. Enclosures**

- (1) ..... (3) ..... (5) .....  
 (2) ..... (4) ..... (6) .....

I hereby declare that all the particulars given above are correct and I agree to abide by all the Rules and Regulations of the University that are in force from time to time.

Station :  
 Date :

**SIGNATURE OF THE APPLICANT**

**FOR OFFICE USE ONLY**

The Admission particulars furnished in the column No. 12 have been duly verified with Originals and the Candidate is eligible for admission

**VERIFYING STAFF**

1. Admission / Cancellation Intimation sent on .....

2. Certificates returned to the Candidate on .....

- (1) S.S.L.C Statement of Marks (2) HSC Statement of Marks  
 (3) UG Statement of Marks / Provisional/ Degree (4) Transfer Certificate

**ASST. /ASST. SECTION OFFICER**

**SECTION OFFICER**

**ASSISTANT REGISTRAR**

**DIRECTOR**

Received the Provisional admission intimation and all the original certificates submitted by me

**SIGNATURE OF THE APPLICANT WITH DATE**



11. Nationality	INDIAN	12. Region	Urban <input type="checkbox"/>	Rural <input type="checkbox"/>																				
13. Religion	<table border="1" style="width:100%; height:45px;"> <tr> <td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td> </tr> </table>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
14. Caste	<table border="1" style="width:100%; height:55px;"> <tr> <td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td> </tr> </table>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
15. Community		SC <input type="checkbox"/> ST <input type="checkbox"/> MBC <input type="checkbox"/> BC <input type="checkbox"/> OC <input type="checkbox"/>																						
16. Differently abled Candidates	YES <input type="checkbox"/>		NO <input type="checkbox"/>																					
17. Are you employed ?	YES <input type="checkbox"/>		NO <input type="checkbox"/>																					
18. Are you a ward of a Defence Service Personnel ? (Army / Navy / Air Force)	YES <input type="checkbox"/> Category :																							
	NO <input type="checkbox"/>																							
19. Are you a ward of an Ex-service person ?	YES <input type="checkbox"/>		NO <input type="checkbox"/>																					
20. Tuition Fee Concession Opted ? (Candidate to tick (✓) any one of the appropriate boxes for avail any one of the Concession)	Differently Abled <input type="checkbox"/> Prisoner <input type="checkbox"/>																							
<div style="border: 1px solid black; padding: 20px; width: fit-content; margin: auto;"> <p><b>Affix Passport Size Photo</b></p> <p><i>Not to be attested</i></p> </div>																								
<p><b>Station :</b></p> <p><b>Date :</b></p> <p style="text-align: right;"><b>Signature of the Candidate</b></p>																								