

INSTRUCTION TO THE CANDIDATES

S.No.	Instructions and Documents to be enclosed, details	(√) / "N.A."
1.	Total number of pages in this document -6 i. Instructions to the candidates. Page - 1 ii. Application Form. Page - 2 & 3 iii. Service proforma. Page - 4 iv. Template to be pasted on outer cover. Page - 5 v. Marks Abstract. Page - 6	
i.	Filled in Application with Service Proforma (If applicable)	
2.	SUPPORTIVE DOCUMENTS	
i.	Birth Certificate or copy of H.Sc., Certificate / School Leaving Certificate / College Leaving Certificate .	
ii.	Mark Sheets from First to Final Year / Semester of MSW Degree Course.(Candidates who have submitted GRADE Sheets instead of Mark Sheet should obtain the statement of marks indicating the actual marks secured from the examination authority and attach a certified copy as an enclosure to the application).	
iii.	Transfer certificate obtained after the completion of MSW Degree Course.	
iv	Permanent Community Certificate Card (If applicable)	
v.	MSW Degree Course completion Certificate from the Head of the Institution studied.	
vi.	Attempt certificate in Final Year/ Final Semester MSW Degree from the Head of the Institution studied	
vii.	MA (Social Work) / MSW Degree Certificate or Provisional Pass Certificate from the concerned University.	
3.	MISCELLANEOUS	
i.	Passpost size photographs affixed in the Application Form (Attested) and Scrutiny Form.	
ii.	One self addressed envelope 23 X 10 cm.	
iii.	Self addressed Stamped Post Card	
iv.	Demand Draft for 1200/- (If applicable).	

Application No :

AR No :

(To be assigned by the Selection Committee)

1.Name :

2.Address:

Affix Passport Size
Photograph
(Same Photograph as
which is uploaded on
web) duly
attested by A
Gazetted Officer.

Mobile :

E_mail id:

3. Date of Birth :

4. Sex :

5. Mother Tongue :

6.Religion :

7a. Nationality :

7b. Nativity :

8a. Community :

8b.Sub-caste code :

9.Plus two
Studied in

10.Qualification :

UG Degree	PG Degree:
Studied at :	
Name of the University :	
Name of the College:	
Joined :(Month &Year)	
Passed :(Month &Year)	
No.of appearances in final year exam:	

11. Service Status:

11a. Service Working
Under :

11b. Date of Service
Entry :

12. Academic Marks obtained by in MSW :

Marks	I -Semester	II -Semester	III -Semester	IV -Semester	Grand Total
Maximum					
Obtained					
					Percentage(%)

22. Community Certificate Details

COM. CERTIFICATE NO :
 COM. CERTIFICATE ISSUED DATE :
 COM. CERTIFICATE ISSUED AUTHORITY :
 TALUK :
 DISTRICT :

23. DD Details

COMMUNITY :

DD NO :
 DD DATE :
 BANK NAME :
 BANK BRANCH :
 DD Amount :

Declaration

I(Name in Full & Block Letters) Son / Daughter / Ward ofan applicant for M.Phil.,(Clinical Social Work) Courses 2016-2017 Session hereby solemnly declare that i belong to.....(Community) and subcaste.....and also declare that the information and the statements given in the application, Scrutiny form and enclosures are true, correct and complete.I further declare that if it is found otherwise, i will be liable to forfeit the seat and /or be removed from the rolls of the institution at whatever stage of study, i may be, besides making me liable for criminal prosecution.

Station:

Date :

Signature of the Candidate

SERVICE PROFORMA

(To be filled by the forwarding authority)

1.	Name of the candidate						
2.	Designation						
3.	Date of entry into Government Service						
4.	Total Service as on 31.07.2016						
5a.	Whether selected by Tamilnadu Medical Services.						
5b.	State Year of Selection. (Proof to be enclosed)						
6.	Name of the appointing authority						
7.	Service Status	Temporary	Probationer		Approved Probationer		
8.	Status of the Institution	State			Local Bodies		
		DME	DMS	DPH			
9.	Complete service particulars till date (May be furnished in a separate sheet in the format duly signed by the forwarding authority)	S.NO	Post	Place	From	To	Total
10.	Service particulars if worked/ working in Hilly Areas.	S.NO	Post	Place	From	To	Total
11.	Whether the candidate is under any subsisting contractual obligation, if so give details.						
12.	Present Station in which the candidate is working and address.						

Date:

Office Phone/ Fax Number:

Signature of the forwarding Officer with seal &
Phone Number of forwarding Officer

Office Seal

Note : The above particulars should be verified scrupulously and in the event of any mal information found later, **the forwarding officer will be held responsible.**

(Templates to be pasted on outer cover)

**APPLICATION FORM FOR
M.Phil., (Clinical Social Work) COURSE
2016- 2017 SESSION**

Service Particulars :

Application No. :

Community :

MA Social Work /
MSW studied at :

From :

To :

PINCODE :

The Secretary,
Selection Committee,
Directorate of Medical Education,
No. 162, Periyar E.V.R. High Road,
Kilpauk, Chennai - 600010.

