



**SPECIAL CATEGORY FORM FOR PARAMEDICAL COURSES
2015-16 SESSION**

Code No.	Category of Special Reservation
01	SON & DAUGHTER OF EX-SERVICEMEN
02	ORTHOPAEDICALLY PHYSICALLY DISABLED

1. Application No :
(As printed in the Prospectus)

2. Name of the Candidate with
Address

.....

.....

.....

.....

PIN Code

Telephone No : Mobile No.

3. Special Category applied for (Tick the relevant Box)

Son / Daughter of	
Code 01	Code 02
Ex-Servicemen	Orthopaedically Physically Disabled

4. Details of DD enclosed

DD No.	DATE	AMOUNT	DETAILS OF BANK

5. Special Category Certificates enclosed

Yes	No
1	2

Signature of the Candidate

(For Instructions see overleaf)

Instructions

1. The Special Category form is to be sent along with the application in the same cover.
2. Put in the relevant box in the outer cover.
3. Candidate should enclose a DD for ₹ 100/- drawn in favour of the Secretary, Selection Committee, Kilpauk payable at Chennai. The Name of the Candidate, Application No. & Address should be written on the reverse of the Demand Draft.
4. Candidates should enclose an additional self addressed envelope(s) (24x12 cms) to send the special reservation counselling call letter(s).
5. Candidates should enclose relevant certificates obtained from the Competent Authority.
6. Application without a DD for ₹ 100/- and without the relevant certificates will be summarily rejected without intimation to the candidate.

Table showing the Code No. and the Special Category

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02	ORTHOPAEDICALLY PHYSICALLY DISABLED