



REGIONAL INSTITUTE OF MEDICAL SCIENCES, IMPHAL – 795 004
(An Autonomous Institute under the Ministry of Health & Family Welfare, Govt. of India)

APPLICATION FORM FOR M. Phil IN CLINICAL PSYCHOLOGY
ENTRANCE EXAMINATION FOR THE SESSION - 2011

Affix one recent
passport
size photograph
here duly attested
by a Gazetted
Officer with
Official Seal.

1. **Name of the candidate :**
(in block letters)
2. **Date of Birth :**
Day..... Month.....Year.....
3. **Nationality :**
4. **General / ST /SC / OBC :****Male/Female :**
5. **Father's Name :**
6. **Mother's Name :**
7. **Address : (In Block Letters)**
a) **Permanent Address :**
.....
.....
b) **Postal Address for Communication :**
.....
.....
Phone No. (including STD Code)**Mobile.....**
8. **State of domicile of the candidate :**

9. **Academic Record** :

Name of the Institute/School/College and University from which the candidate passed –

(A) X/HSLC Examination :

Year of passing :

(B) 10+2 Or Equivalent :

Year of passing :

(C) B.A. or B.Sc. :

Year of passing :

(D) M.A./M.Sc. in Psychology :

Year of passing :

DECLARATION

I hereby declare that the application has been filled in with my own handwriting and the information give in the application form is correct. In case, at any stage if the information furnished by me is found incorrect my admission may be cancelled. I further, declare that I have read the rules as given in the information bulletin and shall abide by the rules and regulations of the Institute.

Place :

Signature of the Candidate

Date :



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ADMIT CARD

M. Phil IN CLINICAL PSYCHOLOGY
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Roll No.

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 by a Gazetted Officer
 with official seal.

Name of the Candidate :
 (In Block Letters)

Specimen signature of the Candidate :
 (to be attested by Gazetted Officer)

Signature of Gazetted Officer :

Name :

Designation :
 (Office Seal)

Officer in-charge of Examination

ATTENDANCE SHEET

M. Phil IN CLINICAL PSYCHOLOGY
ENTRANCE EXAMINATION FOR THE SESSION - 2011

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 Officer with official
 seal

Name of the Candidate :
 (In Block Letters)

Signature of the Candidate

TO BE FILLED AT THE TIME OF EXAMINATION

Signature of the Candidate :
 at the time of Examination

Roll No.

Signature of the Invigilator

Note : In case the candidate is absent, Invigilator should write ABSENT and put his/her signature

INSTRUCTIONS FOR CANDIDATE

1. The Examination will be conducted at Examination Hall of Regional Institute of Medical Sciences, Imphal on 30 .08.2011 at 11 A.M.
2. Candidates should report at the examination hall 15 minutes before the commencement of the examination. No candidate will be permitted to enter the hall after 15 (fifteen) minutes of starting of the examination
3. Examination will be held from 11 A.M. to 12.30 P.M.
4. No candidate will be allowed to sit in the examination without the Admit Card.
5. Candidate should bring his/her own fountain pen or ball pen.
6. Carrying of Mobile Phone, pager, calculator, book printed or written bits of paper or any objectionable materials is not allowed inside the examination hall.
7. No candidate will be allowed to leave the examination hall before the end of one hour. Going to Toilet during examination hour will not be permitted.
8. Each candidate must write his/her own Roll No. on the answer sheet at the space provided.
9. Silence must be observed in the examination hall. Any candidate found using unfair means or improper conduct will be liable for expulsion from the examination hall.
10. The candidates are advised to preserve the Admit Card till the examination is over.

CERTIFICATE TO BE FURNISHED BY THE EMPLOYER
(for in-service candidates)

Certified that Dr /.(Mr./Miss/Mrs.) :.....
is serving as..... in the Department of
..... since..... He/She will be
relieved, if selected, for the M.Phil. course within the stipulated time for admission. To the
best of my knowledge he/she bears a good moral character.

Signature :

Place :

Name :

(In Block Letters)

Dated :

Designation :

(Office seal)