APPLICATION FORM FOR ENTRANCE EXAMINATION FOR ADMISSION
TO M.Phil. CLINICAL PSYCHOLOGY COURSE FOR THE SESSION – 2016

1. Name of the Candidate:
   (in block letters) ..............................................................

2. Date of Birth: Day......... Month......... Year.........

3. Nationality: .................

4. Category: General/ST/SC/OBC.......... Gender: 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. ........................................

8. State of domicile of the Candidate: ..............................................................

Contd... 2/-
9. **Academic Record:**
   (A) **X/III.S.C.**
      i) Name of the Institute/School/College: .........................................................
      ii) Name of the Board/Council: .................................................................
      iii) Year of passing: ......................
   (B) **10+2 or Equivalent**
      i) Name of the Institute/School/College: .........................................................
      ii) Name of the Board/Council/University: .....................................................
      iii) Year of passing: ......................
   (C) **B.A./B.Sc.**
      iv) Name of the Institute/College: ...............................................................
      v) Name of the Board/University: ...............................................................
      vi) Year of passing: ......................
   (D) **M.A./M.Sc. in Psychology**
      vii) Name of the Institute/College: ..............................................................
      viii) Name of the Board/University: .............................................................
      ix) Year of passing: ......................

**DECLARATION**

I hereby declare that the application has been filled in with my own handwriting and the information given 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: .........................
CERTIFICATE TO BE FURNISHED BY THE EMPLOYER
(for in-service candidate)

Certified that Dr./Mr/Miss/Mrs. .................................................................

Is serving as .............................................................. in the Office / 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 may

knowledge he/she bears a good moral character.


Signature : ................................................

(Head/Principal/Director)

Place : .................................

Name : ................................................

Date : .................................

Designation : ................................................

(Office seal)
ADMIT CARD

ENTRANCE EXAMINATION FOR ADMISSION
TO M.Phil. CLINICAL PSYCHOLOGY COURSE FOR THE SESSION – 2016

Roll No.

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)

ATTENDANCE SHEET

ENTRANCE EXAMINATION FOR ADMISSION
TO M.Phil. CLINICAL PSYCHOLOGY COURSE FOR THE SESSION – 2016

Roll No.

Name of the Candidate: .................................................................
(in Block letters)

TO BE FILLED AT THE TIME OF EXAMINATION

Signature of the Candidate: ...........................................................
(at the time of Examination)

Signature of the Invigilator

Note: In case the candidate is absent, Invigilator should write ABSENT and put his/her signature column.
INSTRUCTIONS FOR CANDIDATE

1. The Examination will be conducted at Examination Hall of RIMS, Imphal on 25.06.2016 at 9.30 A.M.

2. Candidate should report at the examination all 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 9.30 A.M. to 11.00 A.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.