



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

**APPLICATION FORM FOR ENTRANCE EXAMINATION FOR ADMISSION
TO M.Phil. CLINICAL PSYCHOLOGY COURSE FOR THE SESSION – 2018**

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 :

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

Contd...2/-

9. **Academic Record** :

(A) **X/HLSC** :

- 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 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 :

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 my
knowledge he/she bears a good moral character.

Signature :
(Head/Principal/Director)

Place :

Name :

Date :

Designation :
(Office seal)



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ADMIT CARD

**ENTRANCE EXAMINATION FOR ADMISSION
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Roll No.

Affix one recent
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Gazetted Officer
with 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 :

Officer-in-charge of Examination

(Office Seal)



ATTENDANCE SHEET

**ENTRANCE EXAMINATION FOR ADMISSION
TO M.Phil. CLINICAL PSYCHOLOGY COURSE FOR THE SESSION – 2018**

Roll No.

Affix one recent
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photograph duly
attested by a
Gazetted Officer
with Seal.

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.