



AMRITA
VISHWA VIDYAPEETHAM
UNIVERSITY

श्रद्धावान् लभते ज्ञानम् Established u/s 3 of the UGC Act 1956

A multi campus university accredited by NAAC with 'A' grade

DEPARTMENT OF SOCIAL WORK
Ettimadai (Coimbatore)

APPLICATION FORM FOR ADMISSION TO MASTER OF SOCIAL WORK
(MSW) PROGRAMME 2016 – 17

Important

- Fill all the information in BLOCK letters only
- Ensure that address, PIN, Phone number with STD code written are correct
- Retain a copy of the filled in application form for future reference
- If any field is not applicable to you, write "NA".
- Incomplete application forms will be rejected without notice
- Attach a Demand Draft of **Rs.350/-** (Rupees Three Hundred and Fifty only) in favour of "Amrita Vishwa Vidyapeetham", payable at "Coimbatore".

Paste your latest
passport size color
photo here

PERSONAL INFORMATION

Name of the candidate in CAPITAL letters as given in SSLC or equivalent certificate (leave blank space between name and initials)

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Gender (M/F): **Marital status**

Place of birth (Mention the name of the village/town): **Blood group:**

Native place..... **Native district:**

State: **Date of birth** (DD/MM/YYYY):

Nationality: **Religion:** **Mother tongue:**

Caste: ***Community category:** (DT, NT, SC, ST, OBC, OC):

(*Claim should be supported by appropriate documents produced at the time of interview)

Are you a person with disability? (Yes / No): **If yes, please provide the details** (its type and degree).....

Father's name: **Age:**

Father's occupation: **Annual income:** Rs.....

Mother's name: **Age:**

Mother's occupation: **Annual income:** Rs.....

Phone numbers of parents / guardian

In the case of married female candidates, please fill up this portion:

Husband's name: Age:

Husband's occupation: Annual income: Rs.....

If the legal guardian is anyone other than the parents or husband, please fill up this portion:

Name: Age:

Relationship with student:

Occupation: Annual Income: Rs.

Address for communication:.....

.....

.....

District:..... State:

PIN Phone No. with STD code:.....

Mobile No. Email ID

Permanent address:

.....

.....

District:..... State:

PIN Phone No. with STD code:.....

The area of your permanent residence comes under Rural Urban

Academic Information (Attach copies of mark/grade sheets and certificates):

Qualification	Main Subject & Ancillary	Name of the Institution	Board / University	Year of Passing	Marks in % or Grades
SSLC / Equivalent					
+2 / equivalent					
Graduation (Specify Degree)					
Any other					

If there was any break in your studies, please specify the reason.

Professional / NGO Experience, if **any** (mention organization, designation and nature of work and the period):

Achievements in extracurricular activities, if any:

Subjects passed in more than one attempt: (Attach additional sheets if required)

S.No.	Title of the subject	No. of Attempts	S.No.	Title of the subject	No. of Attempts

How did you come to know about Amrita?

Newspapers		Internet		Friends		Television	
Others specify							

What are the reasons for pursuing PG in social work?

Why did you choose AMRITA for pursuing PG in social work?

What are your previous social work experiences?

DECLARATION BY THE APPLICANT

I, _____ son/daughter
of _____

hereby declare that the particulars given by me in the application are true. I shall produce the original certificates at the time of admission or on demand. If, in the future, any information is found to have been furnished falsely or incorrectly or any information suppressed to secure admission, I shall withdraw from the programme without any claim or considerations.

Place: _____ Signature of the candidate: _____

Date: _____ Name: _____

DECLARATION BY THE PARENT / GUARDIAN

I, _____ undertake the responsibility of my son / daughter / ward _____ who is seeking admission in the Amrita Vishwa Vidyapeetham and declare that the information furnished by him/her is correct and true and that if, in the future any information is found to have been furnished falsely or incorrect or any information suppressed to secure admission, I shall withdraw my son /daughter/ward from the programme without any claim or consideration of the period of study / stage of the programme she/he has completed.

Place: _____ Signature of the Parent/Guardian _____

Date: _____ Name: _____

Send your completed application to the Admission Coordinator (MSW), Department of Social Work, Amrita Vishwa Vidyapeetham, Amrita Nagar (P.O.), Ettimadai, Coimbatore, Tamil Nadu – 641 112

**PLEASE FILL UP YOUR COMMUNICATION ADDRESS IN CAPITAL LETTERS
AND RETURN IT ALONG WITH THE COMPLETED APPLICATION FORM**

Name : _____
S/o; D/o: _____

_____ Post.
_____ Dist.
_____ State

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_____ Dist.
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