## TRAINING INSTITUTE FOR THE TEACHERS OF THE VISUALLY HANDICAPPED

## RAMAKRISHNA MISSION BLIND BOYS' ACADEMY

**Recognized by:** REHABILITATION COUNCIL OF INDIA, NEW DELHI

P.O. – NARENDRAPUR, KOLKATA – 700 103

(A branch centre of Ramakrishna Mission, Belur Math, Howrah, West Bengal)

## **APPLICATION FORM**

## For admission to 2025-27

B. Ed. Special Education (Visual Impairment) affiliated to the University of Calcutta

| 1.  | Full Name in English<br>(in Block Letters)       | :  | Passport<br>Size<br>Photograp<br>To be |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|--|--|
| 2.  | Date of Birth<br>(To be supported by docume      | :<br>nt)   | pasted                                 |  |  |  |  |  |  |
| 3.  | a) Father's Name                                 | :  |  |  |  |  |  |  |  |
|   | b) Mother's Name                                 | :  |  |  |  |  |  |  |  |
| 4.  | Monthly family income (to be supported by docume | :<br>nt)   |  |  |  |  |  |  |  |
| 5.  | Permanent Address<br>Including P.S.              | :  |  |  |  |  |  |  |  |
| 6.  | Present Mailing Address<br>Including P.S.        | :  |  |  |  |  |  |  |  |
| 7.  | Telephone No.                                    | :  |  |  |  |  |  |  |  |
| 8.  | E-mail address                                   | :  |  |  |  |  |  |  |  |
| 9.  | Marital Status                                   | : Married / Unmarried                              |  |  |  |  |  |  |  |
| 10  | . Aadhaar Card No.                               | :  |  |  |  |  |  |  |  |
| 11. Do you belong to any of the handicapped categories? If yes, tick the correct box. |  |  |  |  |  |  |  |  |  |
|   | a) Visually Handicapped                          | b) Hearing Handicapped                             |  |  |  |  |  |  |  |
|   | c) Orthopedically Handicapp                      | ped d) Otherwise Handicapped                       |  |  |  |  |  |  |  |
|   | If you are handicapped in ar                     | ny way, submit valid certificate to that effect    |  |  |  |  |  |  |  |
| 12  | . Do you belong to any of the                    | following categories? If 'yes' tick the correspond | ing box.                               |  |  |  |  |  |  |
|   | a) Scheduled Caste                               | b) Scheduled Tribe c) Other Backward C             | lass                                   |  |  |  |  |  |  |
|   | If the answer is 'yes', submit                   | certificate from an appropriate authority.         |  |  |  |  |  |  |  |

| 13. E<br>a)  | ducati  | onal Qua  | lification          | s :                | ( Attested o   | copies of testimo   | nials to b         | e submitt                | ed)   |              |  |
|--|---|---|---------------------|--------------------|----------------|---|--------------------|--------------------------|-------|--------------|--|
| SI.  | Name of the<br>Exam Passed                                  |   |                     | Board / University |                |   | Year of<br>Passing |                          |       | bjects taken |  |
| 1.   | M.P. / Equivalent   |   |                     |                    |                |   |                    |                          |       |              |  |
| 2.   | H.S. / Equivalent   |   |                     |                    |                |   |                    |                          |       |              |  |
| 3.   | B.A. /<br>B. Sc.<br>(Pass/Hons)                             |   |                     |                    |                |   |                    |                          |       |              |  |
| 4.   | M.A. / M.Sc.  |   |                     |                    |                |   |                    |                          |       |              |  |
| b)   | Acad  | demic att   | ainment             | :                  |                |   |                    |                          |       |              |  |
| Examina  |   | Full  | Marks               |                    | Percentage     | Examination   | Full               | Mark                     |       | Percentag    |  |
| Passe<br>M.P   |   | Marks   | Obtaine             | ed                 | of Marks       | Passed<br>H.S.  | Marks              | Obtain                   | ed    | of Marks     |  |
| Gradua<br>Pass (Fo                                     | tion<br>r Pass  |   |                     |                    |                | Graduation<br>Hons.   |                    |                          |       |              |  |
| Pos<br>Gradu   | t   |   |                     |                    |                | Any other University Examination. Please mention the name of the Examination. |                    |                          |       |              |  |
| c)   |   |   |                     |                    |                | study at the Gra<br>hemistry/Biology  |                    |                          | ngali | , English,   |  |
|  |   |   |                     |                    | To be suppo    | rted by Employe   | er's Certific      | cate) (Vo                | lunta | ıry/Unpaid   |  |
| SI. Name<br>No. Org                                    |   | ame of the Institution/<br>Organisation served,<br>with<br>Idress and RPWD Regn<br>o. if applicable |                     | D                  | esignation     | Monthly<br>emoluments in<br>the pay scale o                                   | n sei<br>f From    | Period of service FromTo |       | emarks       |  |
| , N  | 10. II a  | ррпсаые   |                     |                    |                |   |                    |                          |       |              |  |
| b) I shal<br>traini<br>P<br>D<br>Check list<br>i) Phot | e best<br>I abide<br>ing per<br>lace<br>ate<br>st<br>ograph | of my kne by the r  | owledge<br>ules and | regul              | lations that r |   | y the auth         | of the ap                | oplic | ant          |  |
| Passe<br>vii) Emplo                                    |   | -   |                     | •                  |                | ates of the Exam<br>nily Income Cert  | •                  | assed                    |       |              |  |

Incomplete forms and forms without supporting documents will be rejected.