



Self attested
photograph
of applicant

UNIVERSITY OF CALICUT,
DEPARTMENT OF PSYCHOLOGY,
Calicut University P.O. 673635

Application form for admission to Post Graduate Diploma in Rehabilitation Psychology (PGDRP)-2024-25
(Recognized by Rehabilitation Council of India, Govt. of India)

1	Name of the applicant (in full, in Block Letters)	
2	Age&Date of Birth	
3	Sex	Female <input type="checkbox"/> Male <input type="checkbox"/> Others <input type="checkbox"/>
4	Address to which communications are to be sent	5. Permanent Home Address (in Block Letters)
	PIN	PIN
6	Mobile No:	
7	E- mail ID:	
8	Name and Phone number of Father/Mother/Guardian	
9	Annual income of the Parent/Guardian	
10	Community (General/OBC/SC/ST/PH) Specify	
11	Details of Application fee	E-Challan Number:
		Date of remittance:
		Mode of remittance:

12. Details of Examination passed: (Self attested copies of mark lists and other relevant documents should be appended)

S.N	Name of Exam passed	Name of the board/ University	Year of examination	Reg No.	Mark obtained	%
1	SSLC					
2	HSC/XIIth Std.					
3	BSc.Psychology					
4	Msc. Psychology					
5						
6						

Declaration : I here by declare that all the statements made by me in this application, in the best of my knowledge, are true, complete and correct.If found incorrect or false, my candidature/ admission may treated as cancelled at any stage.

Place:

Date:

Signature of Applicant:

DEPARTMENT OF PSYCHOLOGY, Calicut University P.O. 673635

Acknowledgement

Received application form..... for the admission of PGDRP for the session of 2024-25

Application No:

Date :

Receiver's Signature