



NIOS

TNHSS

SECONDARY COURSE

SENIOR SECONDARY COURSE

**ACADEMIC COURSE**

**DISTANCE EDUCATION**

APRIL MAY EXAMINATION

YEAR

OCTOBER NOVEMBER EXAMINATION

1. Name of Candidate (Capital Letters)	:	<input type="text"/>
2. Fathers Name (Capital Letters)	:	<input type="text"/>
3. Mothers Name (Capital Letters)	:	<input type="text"/>
4. Guardian Name (Capital letters) for Orphan	:	<input type="text"/>
5. Postal Address	:	<input type="text"/>
		<input type="text"/>
		<input type="text"/>
		<input type="text"/>
		<input type="text"/> Pin <input type="text"/>
E-mail		<input type="text"/>
6. Contact Number	:	Phone <input type="text"/> <input type="text"/>
		Mob <input type="text"/> <input type="text"/>
7. Age & Date of Birth	:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
8. Gender	:	<input type="text"/>
9. Course Applied for	:	<input type="text"/>
10. Medium of Study	:	<input type="text"/>
11. Mother Tongue	:	<input type="text"/>
12. Nationality	:	<input type="text"/>
13. Religion	:	<input type="text"/>
14. Your Previous Qualification	:	<input type="text"/>
15. Fathers Education Qualification	:	<input type="text"/>
16. Mother Education Qualification	:	<input type="text"/>
17. Place of Residence	:	<input type="text"/>
18. Employment	:	<input type="text"/>
19. Annual Family Income	:	<input type="text"/>

**ACADEMIC COURSE**

The Examination Center Selected District :

Choose Subjects

Sub I :

Sub II :

Sub III :

Sub IV :

Sub V :

X<sup>th</sup> Board Exam Details (Senior Secondary Course Only) :

(a) Year of Passing

(b) Roll Number

(c) Board

Registration Fee. Details :

Mode of Fee. DD / CASH. Reg. fee. Rs.

DD No

Date of Bank Draft

Bank Name

Permanent Address :

Pin

**DECLARATION OF STUDENT / PARENT**

I hereby declare that, I am enrolling myself for the correspondence course of distance education. I have gone through the brochure and website of this course and I have fully understood it. I agree and accept the terms and conditions said in the brochure and website. I also agree that it is my personal responsibility to study the course and to pass the examination.

All disputes and claims will be resolved by way of Arbitration according to the Arbitration and Conciliation Act, 1996 and the Jurisdiction will be in Ernakulam district. If the applicant violates any of the terms of the rules and regulations of the course he / she is likely to be terminated and no part of the fee collected would be refunded. The institution will not be liable for any failure due to act of God, act of Government or Statutory undertaking or anything beyond the institution's control, nor we would be liable for any incidental or consequential loss or damage arising out of this.

Signature of Student \_\_\_\_\_ Date

Signature of Parent \_\_\_\_\_ Place

**LIST OF DOCUMENTS WITH APPLICATION (Specify No. of Copies)**

1.  2.

3.  4.

**OFFICE USE ONLY**

Application Reference Number

Student Registration Number