



TATA INSTITUTE OF SOCIAL SCIENCES

V.N. Purav Marg, Deonar, MUMBAI 400 088

APPLICATION FORM PROCESSING FEE

For Indian Students: Rs. 1000/-

For International Students: US \$50

SBI Journal No.: _____

Date: _____

Bank & Branch: _____

Amount Rs. _____

APPLICATION FORM FOR ADMISSION TO The Integrated M.Phil. – Ph.D. Programme in

(Please ✓ tick any one only)

- | | |
|--|--|
| <input type="checkbox"/> Habitat Studies | <input type="checkbox"/> Social Sciences |
| <input type="checkbox"/> Health Systems Studies | <input type="checkbox"/> Social Work |
| <input type="checkbox"/> Management & Labour Studies | <input type="checkbox"/> Disaster Management |
| <input type="checkbox"/> Development Studies | |
| <input type="checkbox"/> Education (Please choose any one campus) | |
| <input type="checkbox"/> TISS Mumbai <input type="checkbox"/> TISS Hyderabad | |
| <input type="checkbox"/> Women's Studies (Please choose any one campus) | |
| <input type="checkbox"/> TISS Mumbai <input type="checkbox"/> TISS Hyderabad | |

Paste your recent
Passport size
(34.9 X 46.57 mm)
Photograph. Write
your full name on
the back of the
photograph for
identification.

INSTRUCTIONS

- Information regarding the programme in the information brochure should be read carefully before filling up this form.
- No application will be considered unless it is complete in all respects.
- The Application Form Processing Fee has to be paid in any branch of the **State Bank of India** through **Challan** and the **Journal No.** is to be entered in the space provided at the top of this page.

1. Name

Title (Mr./Ms., etc.)

(Last Name)

(First Name)

2.. (a) Place of Birth

(b) Date of Birth

DD

MM

YYYY

3. (a) Nationality

(b) State of Domicile

4. Father's/Mother's/Spouse's Name

Title (Mr./Ms., etc.)

(Last Name)

(First Name)

His/Her Occupation

Annual Income in Rs.



5. Address

	Address for Correspondence	Permanent Address (if different)
	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
Town or City	<input type="text"/>	<input type="text"/>
State	<input type="text"/>	<input type="text"/>
Postal Code	<input type="text"/>	<input type="text"/>
Country	<input type="text"/>	<input type="text"/>
Telephone	<input type="text"/>	<input type="text"/>
Mobile	<input type="text"/>	<input type="text"/>
Fax	<input type="text"/>	<input type="text"/>
E-mail	<input type="text"/>	

6. Category (PLEASE TICK ✓ THE APPROPRIATE BOX)

- (i) GN
- (ii) SC
- (iii) ST
- (iv) OBC (NC)
- (v) KM
- (vi) PWD LV/VI HI LD/CP

GN: General; **SC:** Scheduled Caste; **ST:** Scheduled Tribe; **OBC (NC):** Other Backward Class (Non-Creamy); **KM:** Kashmiri Migrant; **PWD:** Person With Disability; **LV:** Low Vision; **VI:** Visually Impaired; **HI:** Hearing Impairment; **LD:** Locomotor Disability; **CP:** Cerebral Palsy

7. Financial Resources

Sources from which you expect to receive financial support during the period of study	Amount expected per month	Period for which you are guaranteed this support

8. State particulars of all examinations passed from S.S.C. upward

Examination Passed	Name of School/College and Place	University/Board	Month and Year of Entry	Month and Year of Leaving	Class, Division or Rank	Subjects of Study (underline special subjects)
S.S.C.						
Graduate						
Postgraduate						
UGC/NET/JRF						
M.Phil.						
Any Other						

9. Give details of your past and present paid employment, if any:

Name of Employer	Place of Employment	Nature of Work	Period		Reason for Leaving
			From	To	

10. If shortlisted, will you be able to submit a permission from your current employer or organisation? Yes No

11. Which field of study are you interested in? Give reasons:

Title of Research Proposal: _____

(A typed copy of the research proposal with title (in English) [in about 1,000 words] on the proposed area of study in the following format should be sent along with other documents)

- (a) Specification of the broad field of study.
- (b) Introduction to the specific problem of interest (Current issues, importance and rationale for the study).
- (c) Research/Work experience in that area, if you have any.
- (d) Reading that you have done in this area of interest.
- (e) Objectives, methods and scope of the proposed study.

DECLARATION

I certify that the information given in this application is complete and accurate to the best of my knowledge and that I have not been disqualified by any University for any examination or for seeking admission for any course of study. If admitted, I agree to abide by the rules and regulations of the Institute.

PLACE

DATE (DD / MM / YYYY)

SIGNATURE OF APPLICANT