APPLICATION No:

DATE:



WASH Sanitation and Hygiene (WASH) Institute 5-296, Anadhagiri 7th Street, Kodaikanal - 624 101, Tamil Nadu

APPLICATION FOR ADMISSION - 2011-12 (Course Affiliafed with Madurai Kamaraj University, Tamil Nadu)												
Application Form for: (Tick the appropriate Box)												
One year PG Diploma Course in Environmental Sanitation Science One year Certificate course for Capacity Building of health Warkers												
1. Name (Write in block letters in Englis as per the Educational record)												
2. Name of Father's/Husband's:												
3. Date of Birth Date M (in Christian era)	Ionth Year		4. Sex			ale 5. N	ational	lity				
16 Deligion I	ste (Please tick copriate box)	the OC	BC	MBC	MBC DNA		SC	(Arur	nthathier)		ST	
8. Communication Address: 9. Permenent Address:												
PIN [PIN					
Phone Number: (With STD code)				Phone Number : (With STD code)								
Mobile Number : Mobile Number : E-mail Address : E-mail Address :						: :						
10. Educational System (Please tick the appropriate box				DIX) HSC B.Sc.,								
Document Papers to be sent: Degree with Subjects and Percentage Copies of Mark statement / Grade (for all semesters / years) Y N Major :												

Place:

Date:

DECLARATION BY THE APPLICANT

I declare that the entries made by me and the documents submitted in support of the information furnished by me in the application form are true in all respects and in case any entry or information or document is found to be false, this shall entail automatic cancellation of my admission besides rendering me liable to such action as the institute may deem proper. I note that my admission to the institute and my continuance on its roll are subject to the provisions of the institute rules and instructions, which may be issued from time to time. I shall abide by the rules of discipline and proper conduct, which may be framed in this regard.

•	oject to the provisions of the institute rules and install abide by the rules of discipline and proper con									
be framed in this regard.	1 1 1	, , , , , , , , , , , , , , , , , , ,								
Place:										
Date:	APPLICANT									
DECLARATI	ON BY THE PARENT / GUARDIAN									
Particulars given above are co	orrect and i declare that my Son / Daughter will al	bide by the rules o								
Place:										
Date:	SIGNATURE OF THE PARENT/GUARDIAN Date:									
I declare that the candidate is spo appointment indicating the duration	Sponsorship Certificate (If applicable) onsored by me is a regular employee. I am also enclosi	ng the proof of								
Station:	Signature of the Sponsor	ing authority								
Date and Seal:	2	Name of the authority								
DD/ Bank Details	E. OCC . II.									
DD/ Bank Details	For Office Use Application Received Date	: Y N								
Name of the Bank :	Compies of Mark Statment enclosed	: Y N								
DD No :-	Copies of Community certificate enclosed									
Date of DD :	DD enclosed	: Y N								
Amount :	All the informations filled in application	: Y N								
	Two self addressed, stamped envelopes	Y N								
	(72x11 CM) each for Rs.10/-									

THE PRINCIPAL, WASH INSTITUTE,

5-296, ANANDHAGIRI, 7 STREET,

KODAIKANAL - 624101 DINDUGAL DISTRICT,

TAMIL NADU, INDIA.

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Phone: 04542 - 240883

E.mail: courses@washinstitute.org

should be enclosed