

TATA INSTITUTE OF SOCIAL SCIENCES

Jamsetji Tata School of Disaster Management

P.G. Diploma in Disaster and Livelihood Recovery

Application Form

(For Office Use)
Registration No. : _____ Interview Date : _____ Letter Sent on : _____
Remarks on checking the certificates _____ Checked by _____
(To be filled by the candidate)
Registration Fee of Rs. 500 Receipt No. _____ Date : _____ D.D. No. _____ Date : _____ Name of the Bank _____

Staple your recent Passport size (34.9 x 46.57 mm) Photograph. Write your full name on the _____

INSTRUCTIONS :

1. No application will be considered unless it is complete in all respect including a typed copy of the statement of purpose.
2. All blanks, except signature, should be typewritten/written in capitals.
3. Strike out whatever is inapplicable.
4. Please mail the completed application form with enclosures to Assistant Registrar(Acaddmic), V.N. Purav Marg, Deonar, Mumbai 400088. Please write 'P.G. Diploma in Disaster & livelihood Recovery ' on the envelope.

1. Name

_____ | _____ | _____
Title (Last Name) (First Name)
(Dr./Mr./Ms.etc.)

2. (a) Place of Birth _____ (b) Date of Birth _____
(c) Age _____ DD MM YYYY

3. (a) Nationality _____ (b) State of Domicile _____
(c) Mother Tongue _____

4. Parent / Guardian's Name

Title (Dr./Mr./Ms.etc.)	(Last Name)	(First Name)
His/Her Occupation	Annual Income in Rs.	

5 Address Correspondence Address Permanent Address (if different)

Town or		
City		
State		
Postal Code		
Country		
Telephone		
Mobile		
Fax		
E-mail		

6.1 If you belong to a Schedule Caste or Schedule Tribe, mention the category and name of the community and attach the relevant documents

(Category)	(Name of Community)
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6.2 Are you a person with disability? Yes/No If yes, please attach supporting documents

7. Languages Known

Language	Speak	Read	Write

8. Local Contact in Mumbai City

Title (Dr./Mr./Ms.etc.)	(Last Name)	(First Name)
Relationship		

Address

Correspondence Address

**Permanent Address (if
different)**

Town or City
State
Postal Code
Country
Telephone
Mobile
Fax
E-mail

9. State Particulars of all Examinations Passed from SSC onwards

Exam Passed	Name of School / College and Place	University / Board	Month and Year of Entry	Month and Year of Leaving	Class and Percenta ge in each year	Subject of Study (Underline Special Subjects)
S.S.C. or Equivalent						

10. Give Details of your Past and Present Paid Employment, Volunteer Work or Internship/Fieldwork, if any :

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

11. If the Details in Columns 9 and 10 do not account for all the time from the date of passing the S.S.C. Examination to the date of this application, the unaccounted period should be explained below

Period unaccounted	How was this time spent?

12. Why do you want to enroll for this Diploma Programme? Please prepare a statement of purpose (500 - 1000 words)

13.1 Please mention any trainings or courses that you have undertaken on disasters or psychosocial care (please add sheets if necessary)

13.2 Please list your hobbies and interests, if any

14. Do you need hostel accommodation? Yes No

15. Financial Resources

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

16. Where did you learn about this Diploma programme from?

- Newspapers (please specify which) _____
- TISS Website
- Internet Groups / Email (please specify which) _____
- Leaflets
- Friends
- Any other (please specify)

17. Check if you have enclosed the following documents in support of your application. Only attested copies need to be attached to the application. Candidates will be required to produce original degrees, diplomas, certificates and testimonials only at the time of interview.

- Copy of a document giving proof of date of birth (for e.g., birth certificate, school-leaving certificate, etc.)
- Three photographs (Name on the reverse)
- Copy of Bachelor's Degree Certificate
- Copy of Bachelor's degree marks / grade certificate
- State of purpose referred to in item 12
- Caste / Community Certificate, if applicable
- Disability Certificate, if applicable
- Fees challan with fees details

Any other :

(ix)

(x)

(xi)

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
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