



TAMILNADU STATE COUNCIL OF VOCATIONAL TRAINING

School of Online & Continuing Education

Under the Aegis of Tamilnadu Council for Open & Distance Learning, Regd Under Govt of Tamilnadu

ADMISSION CUM EXAMINATION FORM

Paste Your Recent Color Photo with Self - Attestation. Don't Pin or Stapled

Examination Session:

Enrollment No :

1. Name of the course :

2. Student Name (in Block Letter) :

3. Father's Name :

4. Address for Communication (in Block Letters):

Pin Code Phone No:

Email ID :

5. (a) Date of Birth : (b) Age : (c) Sex : M F

(d) Nationality : (e) Mother Tongue :

6. Previous Academic Qualification:

| S.No | Examination Passed | Board / University | Reg.No Year of Passing | Marks Obtained | % of Marks | Medium |
|------|--------------------|--------------------|------------------------|----------------|------------|--------|
| | | | | | | |

7. Mention the Subjects Appearing :

1. 2. 3.

4. 5. 6.

8. Employment Record

(a) Designation :

(b) Company Name & Address with Phone No :

(c) Period of Employment :

9. I declare that the particulars given above are correct and that I will, if admitted, abide by the rules & regulations of TNSOCE.

Place:

Date :

Signature of the Student

Enclosure

(a) Xerox copy of (i) Date of Birth (ii) Educational Qualification

(b) Demand Draft. (c) Address Proof & Identity Proof

OFFICE USE ONLY

Centre Name & Code :

Date :

Verified and Checked

Coordinator Signature with Seal



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RECOGNITION OF PRIOR LEARNING APPLICATION (RPL)

Enrolment No : _____

Assessment Session : _____

Name of the Applicant : _____

Name of the Course : _____

TRAINING / INTERNSHIP / WORK EXPERIENCE DETAILS

| S.No | Place of Training / Internship / Work Experience | From | To |
|------|--|------|----|
| | | | |
| | | | |
| | | | |

| S.No | RPL Module Name (Subject Name) | Percentage / Grade (For Office Use Only) |
|------|--------------------------------|---|
| | | |
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| | | |
| | | |

DECLARATION BY THE APPLICANT

I hereby declare that I have read and understood the RPL Rules, regulations along with the eligibility conditions prescribed by TNSOCE. I am aware that I need to fulfil training / work experience related requirements for the award of certification in additional to normal course of learning. I further declare that if required, I shall submit any other document(s) that may be required by TNSOCE in future. I also understand that the TNSOCE is empowered to cancel my candidature / admission, forgo the fee deposited and the claim for certification, if any information furnished by me is found to be incorrect, misleading or counterfeit.

Place & Date:

Signature of the Applicant