संचालक ग्वालियर मानसिक आरोग्यशाला, ग्वालियर मध्यप्रदेश

Email-gma_gwalior@rediffmail.com Phone No. - 0751.2481841 1.24810ना ग्वालियर, दिनांक (४) 6/2} कमांक / स्टू० / 2024 2075-76

प्रति,

अपर संचालक, विज्ञापन, जनसम्पर्क विभाग वाणगंगारोड, भोपाल

विषय :- M.Phil Clinical Psychology पाठ्यकम प्रवेश सूचना प्रकाशन कराने के संबंध में ।

विषयान्तर्गत लेख हैं कि, ग्वालियर मानसिक आरोग्यशाला में M.Phil Clinical Psychology पाठ्यकम प्रवेश सूचना प्रकाशन का प्रारूप दो राज्य स्तरीय हिन्दी एवं एक राष्ट्रीय स्तर के अधिकतम प्रचार प्रसार वाले समाचार पत्र में प्रकाशित कराया जाना हैं। अतः उक्त पाठ्यकम प्रवेश सूचना शीघ्र ही प्रकाशन कराये जाने का कष्ट करें।

सलंग्न - उपरोक्तानुसार ।

संचालक

म्बालियर मानसिक आरोग्यशाला ेंग्वालियर, म०प्र० 📈 ग्वालियर, दिनांक

कमांक / स्टू० / 2024

प्रतिलिपि :-

1. लेखा शाखा स्थानीय आरोग्यशाला की ओर सूचनार्थ एवं आवश्यक कार्यवाही हेतू ।

ग्वालियर मानसिक आरोग्यशाला ग्वालियर, म०प्र०

Gwalior Mansik Arogyashala, Gwalior (M.P.)

(An autonomous Institute under the Department of Medical Education, M.P.)

Jail Road, Gwalior – 474012, Ph. No.- 0751-2481841

Website- WWW. gwaliormentalhospital.org

Admission notification for M. Phil course, session- 2024-26 (Affilliated to Jiwaji University, Gwalior& Approved by RCI).

The Director Gwalior Mansik Arogyashala invites application prescribed Proforma for M. Phil in Clinical Psychology (two years hospital based full time) course for the session 2024-26 at Gwalior Mansik Arogyashala Gwalior (M.P.)

- Number of seats: 8 Seats. (Duration: 2 Years)
- Essential Qualification for M.Phil in Clinical Psychology:- Regular M.A./M.sc. in Psychology / Applied Psychology of a recognized university/ Indira Gandhi Open University (IGNOU) with minimum 55% marks for UR/OBC candidates and 50% marks for ST/SC candidates.
- Reservation applicable as per M.P. Government Rule.
- Examination Fee: Rs. 1000/- for UR and OBC, Rs 500/- for (ST/SC candidates of Madhya Pradesh)

Fee should be submitted ad non-refundable demand draft drawn in favour of the "Director, Gwalior Mansik Arogyashala" payable at Gwalior. It should be enclosed with application.

- Candidates must enclose self attested photocopies of marks sheet, degree certificates, cast
 certificate, NOC of working, two recent passport size photo etc. Application received without
 application fee or any other relevant documents will not be entertained. Attach checklist for the
 enclosures.
- The candidates must produces the original certificates, mark sheets, testimonials, caste certificates/ residential/disability certificates, if applicable etc. and other relevant documents at the time of entrance examination.
- Note: Candidates appearing in their final year PG examination can apply, but they must submit the proof of having passes the final year PG examination at the time of counseling. Otherwise they will not be allowed to appear in counseling and their candidature will be cancelled ..

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- Important Dates:
- The last date of Submission of application is; 05.07.2024 by, 5 pm at Director office, Gwalior Mansik Arogyashala, Jail Road, Gwalior, M.P. Pin: 474012
- Date of entrance Examination: 21.07.2024
- Time of reporting at centre: 9 am
- Date of Counselling: 22.07.2024
- Date of Joining: 05.08.2024

Download the Application form from Hospital website

Note: Canvassing in any form will be a disqualification. Number of seat of the courses subject are liable to change without assigning any reason before admission by the director.

• For any Clarification/inquiry kindly contact on :8299522430

Gwalior Mansik Arogyashala, Gwalior

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Gwalior Mansik Arogyashala, Gwalior (M.P.)

(An autonomous Institute under the Department of Medical Education, M.P.)

Jail Road, Gwalior-474012, Ph. No.- 0751-2481841.

APPLICATION FORM FOR ENTRANCE EXAMINATION 2024-26

Website- WWW. gwaliormentalhospital.org

Ro	11	No.

15. Present occupation if any:-

1. Course Name:

2. Reservation	Category- GEN/OBC/S	SC/ST/ EWS					
3. Name (in Bl	ock letter):						
4. Gender-	1. Male 2. Fema	le					
5. Father/ Hus	band Name: (in Block	letter)	•				
6. Mother 's N	ame: (in Block letter)						
7. Date of Birt	h:	8					
8. Marital stat	us: 1. Married 2. U	nmarried					
9. Domicile ad	ldress:						
10. Email add	ress:						
11. Mobile. No	o.:						
(1) Parent's	s: ((2) candidate:					
12. Correspondence address:							
13. Permanen	t address:						
	J. Educational Qualifications:						
	100	g 1.	l v cn	0.4			
Examination	Board/University	Subject .	Year of Passing	%			
High school	a 1						
Intermediate							
B.A.							
M.A./M.SC.	•						
Any others				_			

16. Bank Details:-

Issue Bank name	Issuing Branch	Amount	Draft No.	Date of issue

	Declaration	
that all the details furn	hed by me in the application form are true. If any false information ter examination joining my candidature will be canceled.	leclare ı is
Date:	9	
Place:		- 1 ot
	Signature of the Candi	date: