



**NATIONAL INSTITUTE FOR THE EMPOWERMENT OF PERSONS
WITH INTELLECTUAL DISABILITIES (DIVYANGJAN)**
(Formerly known as National Institute for the Mentally Handicapped)
(Department of Empowerment of Persons with Disabilities (Divyangjan)
Ministry of Social Justice & Empowerment, Govt. of India
MANOVIKAS NAGAR, SECUNDERABAD – 500 009
An ISO 9001:2015 Institution



**DETAILED NOTIFICATION FOR
VACANT SEATS FOR ADMISSION INTO MSEC (DAY CARE & HOSTEL)**

NIEPID -Model Special Education Centre, is an Autonomous body under the Department of Empowerment of Persons with Disabilities, Ministry of Social Justice & Empowerment, Govt. of India, **located at C-44A, Sector-40, Noida, U.P-201301.** Applications are invited for Day-care and Hostel admission for Children with Intellectual Disabilities.

DOCUMENTS REQUIRED FOR ADMISSION:

- Date of Birth Certificate.
- Passport Size photographs – 04 copies.
- Disability Certificate (ID) mentioning severity of the Disability.
- Unique Disability Identity (UDID)
- Covid -19 Vaccination status of the CWSN.
- Photocopy of Aadhar card of the Child and Parents.
- Income certificate of the Parents (including Below Poverty Line (BPL) card, if any)
- Caste Certificate

Criteria for Admission for Hostel & Day-care:-

- Age limit: Hostel & Day-care Admission 06 to 14 years.
 - Maximum age for stay in Day care & Hostel: upto 17 years of age or maximum duration of 03 years whichever is earlier.
 - Residing outside NCT of Delhi in case of hostel admission.
 - Residing within NCT of Delhi in case of Day care.
 - Parents to appoint a local guardian for their Child/ward being admitted in Hostel of any exigencies of School.
 - Fees Structure for Hostel (Monthly /Quarterly) as per approved minutes of 103 EC dated 28.07.2014
- | | | |
|----------------------|---|---|
| ○ Below Poverty line | : | Free |
| ○ Above Poverty line | : | 100/- (per month) |
| ○ Security Deposit | : | 300/- |
| ○ Tuition Fees | : | 40/- (per month) (Both Day care and Hostel) |

GENERAL TERMS & CONDITIONS:

- 1) For Hostel facility, preference will be given to outstation parents, and to the families having no special education services in their vicinity. If such a facility is available, justification should be provided as to why the family is unable to avail the services from the local special school.
- 2) Merit of the case will be considered in terms of economic condition. Preference will be given to the families from lower economic strata having an income of not more than 6,500/- per month.
- 3) Weightage will be given to the families having social and family problems such as being a single parent, family having more than one child with Intellectual Disability or a severely retarded child with poor social support.
- 4) It is compulsory for all Parents to appoint a local guardian for their child/ward being admitted into the Hostel, in order to take care of any exigencies like sudden closure of School, sudden illness, or for any other reasons where parents are not able to reach the school in time.
- 5) Day care and hostel admission will be done based on availability and meeting the criteria.
- 6) The decision of the admission committee will be final and binding by the applicants.

I accept the terms and conditions mentioned as above.

Email:niepidmsecnoida@gmail.com

फोन PHONE:0120-2500240

NIEPID-Model Special Education Centre

National Institute for the Empowerment of PwID

(Ministry of Social Justice and Empowerment, Govt. of India

C-44A, Sec-40, Gautam Budh Nagar, NOIDA-201301(U.P.)

एन.आई.ई.पी.आई.डी. मॉडलस्पेशलएजुकेशन सेंटर

राष्ट्रीय बौद्धिक दिव्यांगजनसशक्तिकरण संस्थान

सामाजिक न्याय और अधिकारिता मंत्रालय, भारत सरकार

सी 44ए, गौतम बुधनगर, नोएडा 201301 उ.प्र.

(डेकेयर/एचबीटी/हॉस्टल) (Day Care/HBT/Hostel)

1. बच्चे का नाम / Name of Child _____
2. लिंग/ Gender M / पुरुष _____ F /स्त्री _____ अन्य / Other _____
3. जन्म तिथि/ Date of Birth _____
4. आयु/ Age _____
5. पिता का नाम/Father's Name _____ व्यावसायOccupation _____
6. माता का नाम/Mother's Name _____ व्यावसायOccupation _____
- 7^० घर का पता/Home Address _____
8. आधार कार्ड नंबर/ Aadhar Card Number _____
9. ई मेल पता/Email Address _____
10. फोन
नं./PhoneNumber _____ लैंडलाईनLandline _____
- मोबाईलनं.Mobile No.: पिताFather _____ माताMother: _____
- 11.व्हाट्सएपनं/Whatsapp Number _____
12. स्थानीय संरक्षक का नाम व पता/Local Guardian Name &
Address _____

मोबाइल नं. व लैंडलाईननं. Mobile No./Landline _____

13. ज्ञातभाषाँ (पढ़ेंयाबोलीजानेवाली)/ Languages Known (Read or Spoken) _____

_____.

14. सामाजिक वर्ग/ Social Category साधारण /General अनुसूचित जाति /Scheduled caste
अनुसूचित जनजाति/Scheduled Tribe अन्य पिछड़ा वर्ग/OBC अल्पसंख्यक/Minority

15. परिवार का आय/ Family Income- पिताFather _____ माता Mother _____

16. दिव्यांगता का प्रकार/ Types of Disability _____

17. सह स्थितियाँ/ Associated Conditions _____

18. क्या बच्चे को मिर्गी के दौरों से पीड़ित है/ Does the Child have epileptic seizures _____

19. क्या बच्चा अपने दैनिक जीवन की गतिविधियाँ करने में सक्षम है/ Is the child able to do the activity of his daily life ?

20. क्या बच्चा कोई दवा ले रहा है/ Is the child on any medication? _____

21. योग्यता और प्रशिक्षण/ Qualification and Training _____

22. क्या वह अपने आप चल फिर सकता है/ Is S/he independent in mobility? _____

23. क्या वह अपने निजी गतिविधियाँ अपने आप कर सकता (ती) है/ Is S/he independent in personal activity/ADL? _____

21. सूचनाकर्ता/ Informer _____

22. आप स्कूल से क्या उम्मीद रखते हैं?/ What do you expect from the School ?

घोषणा / Declaration

मैं एतद्द्वारा घोषणा करता हूँ कि इस आवेदन में दी गई जानकारी मेरे सर्वोत्तम ज्ञान और विश्वास के अनुसार सत्य और सही है। मैं यह भी नोट करता हूँ कि यदि उपरोक्त में से कोई भी कथन गलत पाया जाता है तो मेरा प्रवेश रद्द किया जा सकता है।

I hereby declare that the information given in this application is true and correct to the best of my knowledge and belief. I also note that if any of the above statements are found to be wrong my admission may be cancelled.

दिनांक / Dated

माता /पिता /संरक्षका का हस्ताक्षर
Mother/Father/Guardian Signature

नाम/Name -

संलग्नक/ Enclosures

1. मेडिकल प्रमाण पत्र Medical Certificate
2. दिव्यांगता प्रमाण पत्र/ Disability Certificate - 02
3. साइकलॉजिकल रिपोर्ट/ Psychological Report
4. एस.डी.एम. आय प्रमाण पत्र/ SDM Income Certificate
5. फोटो(2) / Photo (2)
6. जन्म तिथि प्रमाण पत्र/ Birth Certificate
7. आधार कार्ड/ Aadhar Card
8. जाति प्रमाण पत्र/ Caste Certificate
9. अद्वितीय दिव्यांगता पहचान /UDID card