

**Internationally Recognised Training
Institute in India**

APPLICATION FORM
for
Admission
to
ISPO CAT II Courses

Recognized by



**INTERNATIONAL SOCIETY
FOR PROSTHETICS & ORTHOTICS**

Eligibility for admission:

Indian Students: Have successfully completed 12 year of schooling with any stream with 50% score

SAARC/NRI/Overseas Students: Have successfully completed 'A' level schooling with 50% score from Boards/Councils of Higher Education established by respective countries recognised as equivalent to 10+2 in India.

Or

Have successfully completed 10 years/ "A" level of schooling with 50% score and 2 years of work experience in Prosthetic and Orthotic domain/industrial training institute certificate/Diploma in Mechanical, Electrical/Electronic Engineering. (applied only for LLPT/LLOT/Orthopaedic Technologist)

Age: Applicant should have completed the age of 17 years at the time of admission

Method of Selection:

Selection is based on Merit. Candidates undergo a preliminary written test and interview.

Course Duration:

- Lower Limb Prosthetics Technologist (LLPT)/Lower Limb Orthotics Technologist (LLOT) - One year six months full time (6 months mandatory clinical practice)
- Orthopaedics Technologist - Three year full time (one year mandatory clinical practice)

Medium of Instruction: English

Important Month:

1. Admission Opens: **January**
2. Accepted completed Application form: **End of April**
3. Entrance Test (written at the institution or over phone, Skype) : **March-May**
4. Confirmation of admission : **April-June** (once institution satisfied with candidature)
5. Remittance of course fee: **June** (Cash/Demand Draft/online payment is acceptable)
6. Commencement of Course: **2nd week of July**

Application Fees:

Application can be obtained by hand from Mobility India on payment of INR 200/- for Indian student & INR 500/- for foreign student or by mail or download from www.mobility-india.org and submitted duly filled application along with demand draft drawn in favour of Mobility India payable at Bengaluru or Bank transfer to Mobility India account.

Documents to be attached to the application:

- Photocopy of 10 and 12 years of schooling certificates and Mark sheet with self-attestation
- Photocopy of certificate from Industrial training institute in Mechanical, Electrical/Electronic Engineering (*If applicable*)
- Photocopy of Character certificate from School/college from where candidate has passed
- Transfer certificate from school/college
- Physical fitness certificate from Government Hospital Doctor
- Sponsorship certificate from the sponsor outlining what costs they will cover and confirming they will fund the entire course (*If applicable*)
- Recommendation letter from organisation (present/past employer) (*If applicable*)
- LABORATORY TESTS- Blood- Ag HBs (Hepatitis B), Ac HCv (Hepatitis C), Tuberculin Skin test (Mantoux) and Complete blood count by Government Hospital doctor
- 2 passport size photos (Description: Size 3.5 x 3.5 cm, Colour of background: white)
- Experience Certificate (*If applicable*)
- Passport Copy (*Applicable only for international students*)
- Disability Certificate (*Applicable only for Indian students*)

Instruction to fill the application form:

- Forms must be filled in applicant's own handwriting
- Use only BLACK OR BLUE Hi-Tec Point type pen to fill up the form
- Applicants must paste their most recent colour photo graph (not older than 3 months)
- Overwriting, striking off or erasing in the form may lead to rejection and should be avoided
- Any discrepancy in the statement and /or submission of incomplete forms will lead to rejection of application/cancellation of admission
- Wherever it is not applicable Write "NA". **don't leave blank box**

Applicants are required to submit photocopies of marks cards, certificates or any other documents and must ensure that:

- The photocopies are taken on A4 size paper only
- The print/scan is clear, legible and readable
- Both sides are photocopied if the original marks card is printed on both sides

DO NOT SEND ANY ORIGINAL DOCUMENTS ALONG WITH THE APPLICATION FORM

SUBMIT ORIGINAL CERTIFICATE AT THE TIME OF ADMISSION IN PERSON FOR VERIFICATION

Cancellation of Admission:

All the admissions made will be provisional and if at any stage during the entire course it is found that the candidate has submitted false information in the application form, his/her candidature for the course will be cancelled and disciplinary action may be taken against him/her as the institutional rules. The institution reserves the right to cancel the admission of any student for a specific reason.

Refundment:

If candidate wanted to cancel his/her admission after the course fee payment or commencement of the classes, refundable of course fees will be subject to institution decision and student cannot claim.

Address to Post your duly filled in application:

*** Do not send the eligibility and admission procedure page no 1 to 4 with application**

Manager

Academic Administration

Mobility India

Rehabilitation Research and Training Centre

1st & 1st 'A' Cross, J.P. Nagar, 2nd Phase, Bangalore - 560 078.INDIA

☎ : +91-80-26492222 / 26597337 / 26491386 - Ext-125 (Academic)

📠 : +91-80-26494444 Ext. - 110

Mail ID to send your duly filled in application:

academic@mobility-india.org



APPLICATION FORM

ACADEMIC YEAR TO

Please affix
stamp size
(2cm x 2.5cm)
photograph
here

Please tick only one course of your choice & fill up the application form
in **BLOCK LETTERS** only

ISPO Recognised Courses

☐ Lower Limb Prosthetics Technologist

☐ Lower Limb Orthotics Technologist

PERSONAL INFORMATION

1. Applicant Name:
(As per school records)

2. Gender: ☐ Male

☐ Female

3. Date of Birth:

Day

Month

Year

3A. Age: years

4. Father's Name:

5. Mother's Name:

6. Father / Mother's Occupation:

6. Blood Group:

7. Nationality: ☐ Indian

☐ Foreign

8. Address for
Communication:

Country:

PIN:

Contact No:

E-mail ID:

9. Are you Person with Disability, If yes: write your disability & assistive device you use

10. Do you require hostel in campus: ☐ Yes ☐ No

11. In Emergency:

A. Contact Person Name:

B. Contact No:

C. Relationship with student:

10. Passport details (only for foreigners):A. Number:

C. Date of issue:

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Day	Month	Year	

B. Issue Place:

D. Date of expiry:

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Day	Month	Year	

11. Language:A. Mother tongue:

B. *Fluency in english:

Reading

* Rate your self

Writing *E:Excellence; G:Good;*Speaking *F:Fair; P:Poor***12. Academic Information**

Exam Passed	Passed Year	Board or University	Maximum Marks	Marks obtained
10 Years of Schooling				
12 Years of Schooling				
Certificate from Industrial training institute in Mechanical, Electrical/Electronic Engineering.				
For Overseas: <i>The class equivalent to 12 years of schooling</i>				

ADDITIONAL INFORMATION

13. Are you working in the Prosthetics & Orthotics Workshop/Community work/Therapy Service at present? If yes describe about your job roles and responsibilities & years of experience.

Enclose experience of certificate

Wherever is not applicable please Write **“NA”**

14. If your study is sponsored by any individual/funding agency, please specify funder details

Name
& address:

Contact No
& Mail ID:

15. If you are a staff/identified by any non government organisation/business entity at present please specify

Name
& address:

Contact No
& Mail ID:

Name & Signature with official seal
(Head of the Organisation)

Enclose recommendation letter from employer

DOCUMENTS TO BE ATTACHED TO THE APPLICATION:

- Photocopy of 10 and 12 years of schooling certificates and Mark sheet with self-attestation ☐
- Photocopy of certificate from Industrial training institute in Mechanical, Electrical/Electronic Engineering (*If applicable*) ☐
- Photocopy of Character certificate from School/college from where candidate has passed ☐
- Transfer certificate from school/college ☐
- Physical fitness certificate from Government Hospital Doctor ☐
- Sponsorship certificate from the sponsor outlining what costs they will cover and confirming they will fund the entire course (*If applicable*) ☐
- Recommendation letter from organisation (present/past employer) (*If applicable*) ☐
- LABORATORY TESTS- Blood- Ag Hbs (Hepatitis B), Ac HCv (Hepatitis C), Tuberculin Skin test (Mantoux) and Complete blood count by Government Hospital doctor ☐
- 2 passport size photos (Description: Size 3.5 x 3.5 cm, Colour of background: white) ☐
- Experience Certificate (*If applicable*) ☐
- Passport Copy (*Applicable only for international students*) ☐
- Disability Certificate (*Applicable only for Indian students*) ☐

Application Fees: INR 200/- (Indian), INR 500/- (Foreigner)

Cash/DD	DD No.	<input type="text"/>	Date.	<input type="text"/>
	Bank Name.	<input type="text"/>		
Bank transfer:	Transaction No.	<input type="text"/>	Date.	<input type="text"/>
	Bank Name.	<input type="text"/>		

DECLARATION

I hereby solemnly and sincerely affirm that I fulfil the eligibility conditions and the statement made and information furnished in the application form are correct and also I have not withheld any information. If it is later found that any information furnished herein is fraudulent, incorrect or untrue, I am liable to prosecution and that my admission to the course is liable to be cancelled.

DATE

STUDENT'S SIGNATURE

FATHER / MOTHER / GUARDIAN'S SIGNATURE

OFFICE USE ONLY

On behalf of Mobility India, I have verified all the details and certificate copies furnished by the candidate and found true.

VERIFIED BY

NAME

DATE

SIGNATURE

Application No:

OFFICE USE ONLY

Roll No:

Remarks

OFFICE USE ONLY

On behalf of Mobility India, I have verified all the details and certificate copies furnished by the candidate and found true.

VERIFIED BY

NAME

DATE

SIGNATURE

Application No:

OFFICE USE ONLY

Roll No:

Remarks

TO BE COMPLETED BY THE PARENT ORGANISATION (COMPULSORY)

1. Please state why you would like the applicant to attend this particular training programme.

2. How will you support and supervise the applicant in their job following their completion of the training programme?

3. What facilities/manpower/ infrastructure do you currently have? E.g Prosthetic/ Orthotic Workshop/Unit, Therapy Unit, CBR programme.

4. Kindly mention the approx. number of persons with disabilities the participant has worked with before training and/or will be working after training? Please mention the type of disabilities.

DECLARATION BY THE PARENT ORGANISATION

(If selected student is an existing employee of your organization)

This is to certify that the applicant is our Employee for the past years. The furnished information about the applicant is true.

Signature of the official authority

Organisation Seal

Date:

(If selected student is a fresh candidate)

This is to certify that the applicant is newly selected to undergo the above said course. The furnished information about the applicant is true.

Signature of the official authority

Organisation Seal

Date:

DECLARATION BY THE STUDENT

To
The Principal

I....., have read the
rules and conditions for my admission into

1. I do hereby promise that I will not:
 - a. Cause any damage to any property of the College and Hostel such as Benches, Switchboards, Furniture, Laboratory equipments, Sports equipment etc.
Any public property in the vicinity of the College or elsewhere
 - b. Deface the Desks, Benches, Chairs, Walls of the Hotel/ Class-Rooms, Blackboards, Toilet, Walls of the college etc., with any writing whatsoever.
2. I will regularly attend all my class throughout the year and I will maintain a minimum of 85% of attendance as per the rules. If for any unforeseen reason I am not able to attend the classes for a long time without prior intimation to the Principal, I shall submit a valid explanation at the earliest. I am aware that if 85% attendance is not maintained in all the subject, I will not be allowed to appear for the Annual Examination.
3. I will appear for all Terminal Tests and Examinations conducted by the College, without fail.
4. I will submit all the assignments, Record books, Home Work etc.. in time for the purpose of continuous evaluation. I shall make an earnest attempt to achieve academic improvement in all the subjects throughout the year.
5. I shall attend the Preparatory Examination, if I fail to do so, I may be debarred from appearing for the Public Examination.
6. I shall keep up the good name of the College in all my thoughts, behaviour and actions
7. I will be fully committed to my studies and will maintain absolute silence in the class and shall not disturb any class by indulging in talks or moving in and out of classroom when classes are in progress.
8. I shall not indulge in ragging or in any other kind of misbehaviour .
9. I shall implicitly accept the decision of the Management as final in all matters of discipline.
10. I will not use any obscene or unparliamentary language anywhere, especially with teaching staff whom I shall respect

Place:.....

Date:.....

Student Signature