

Nomination Form*

Five Days' course on "Wheelchair Service Training Package- Basic level (WSTP-B)"

Venue: MOBILITY INDIA, 1st & 1st "A" Cross, J.P.Nagar 2nd Phase, Bangalore 560078.

Course date: 21st November to 26th November, 2016 (Extended one day for online test)

Title	Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Ms <input type="checkbox"/>	Other
Full Name (Capital letter)				
Name for the Certificate (Capital letter)				
Gender	Male <input type="checkbox"/>		Female <input type="checkbox"/>	
RR No. (RCI Registration Number)				
Occupation:				
**Professional Qualification:				
Organisation/ Hospital TYPE	GOVT. <input type="checkbox"/>	NGO <input type="checkbox"/>	CORPORATE <input type="checkbox"/>	
No. of years of Experience:				
Organisation/ Hospital NAME				
Address				
Telephone number	Mobile:		Work:	
Email address	Personal		Official	
Website	www.			
Are you involved in Community Based Rehabilitation (CBR)?	YES <input type="checkbox"/>		NO <input type="checkbox"/>	

Are you currently involved in wheelchair service and training delivery?	YES <input type="checkbox"/> NO <input type="checkbox"/>	
How would you rate your experience in wheelchair service delivery?	No experience <input type="checkbox"/> Some limited experience <input type="checkbox"/> Very experienced <input type="checkbox"/>	<i>Comments:</i>
Write the reasons for attending this course and your future plans in related to Wheelchair service provision		
Please indicate if you do or do not require accommodation***	Accommodation required <input type="checkbox"/>	Accommodation not required <input type="checkbox"/>
If you have a disability please let us know if you require any special assistance		
Recommended by HOD/ Concerned reporting officer	NAME: Signature: Date and time: Office seal:	

- Thank you for completing this nomination form.
- Please send us the duly filled in nomination form approved by the department in-charge or concerned authority, to academicdept@mobility-india.org at the earliest.
- The selection committee decision will be final. You will be contacted to confirm your participation for the course.

*** Filling the nomination form does not guarantee your confirmation for participation**

****Kindly attach copies of the professional qualification certificate/s**