

## Rehabilitation Research and Training Centre Bengaluru, India

Internationally Recognised Training Institute in India

## APPLICATION FORM Certificate in Rehabilitation Therapy

Recognized by





B. Contact No:

## **APPLICATION FORM**

ACADEMIC YEAR TO

Respecting people's abilities  Please fill up the application form in <b>BLOCK LETTERS</b> only								
RCI Recognised Course								
Certificate in Rehabilitation Therapy								
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 SC ST Backward Class 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 (Provided based on the availability)								
11. In Emergency:								
A. Contact Person Name:								

C. Relationship with student:

12. Passport details (only for foreigners):  A. Number:  B. Issue Place:  D. Date of expiry:  Day Month Year  Para Month Year  No Month Year  Para Month Year  No Month Year  Para Month Year  No Month Year											
				N4 1							
Exam Passed	Passed Year	Board	Maximum Marks	Marks obtained							
10 Years of Schooling											
12 Years of Schooling											
B. Foreign Nationals:											
Exam Passed	Passed Year	Board									
The class equivalent to 12 years of schooling											
ADDITIONAL INFORMATI	ON										
15. 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"

DOC	JMENTS TO I	BE ATTACHED T	O THE A	PPLICAT	TION (PHO	OTO COPY ON	LY):	
	10 years of	schooling certific	ates and	d Mark sh	eet			
	12 years of schooling certificates and Mark sheet							
	Character certificate from School/college							
	Transfer certificate from school/college							
	Sponsorship certificate from the sponsorer							
	Recommendation letter from organisation (present/past employer) (If applicable)							
	LABORATORY TESTS- Blood- Ag Hbs (Hepatitis B), Ac HCV (Hepatitis C), Tuberculin S test (Mantoux) and Complete blood count by Government Hospital doctor							
	2 passport s	ize photos (Desc	ription: \$	Size 3.5 x	3.5 cm, C	olour of backg	round: white)	
$\Box$	Aadhaar card (Indian national students)							
	Passport Copy (International students)							
	Disability Certificate (Indian national students)							
Appli	cation Fees:	INR 200/- (India	an) INR	500/- (E	oreigner)			
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Cash	/DD	DD No.					Date.	
		Bank Name.						
Bank	transfer:	Transaction No.					Date.	
		Bank Name.						
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DECL	ARATION							
and in	nformation ful nation. If it is	rnished in the ap	oplicatio t any inf	n form ai	re correct	and also I ha d herein is fra	the statement made ave not withheld any udulent, incorrect or to be cancelled.	
						DATE		
STUDENT'S SIGNATURE								
-ATHE	R / MOTHER /	GUARDIAN'S SIG	GNATUR	E				