

APPLICATION FORM FOR

Regional and State Leadership Training and Empowerment Program for youth with disabilities (YLTEP-III)-2018

Please read the following instructions before filling the application form.

1. Only students within 17 to 25 years are eligible.
2. Only students with **50% and above** disability can apply.
3. Students those who are continuing their studies only are eligible.
4. **Disability/Resident** Certificates are mandatory.
5. The form is to be filled by the candidate.
6. Include one recent passport size colour photograph.
7. Decision of the selection committee will be final and binding.

INCOMPLETE FORMS WILL BE REJECTED

Please send the completed form to

SWABHIMAN

A/98, Budhanagar, Bhubaneswar – 751 006

Odisha, India.

Tel.: 0674 – 2313313 / 9238106667/9040767375

LAST DATES FOR RECEIPT OF APPLICATION

SINo.	Month	Region	Place of Program	Last date of application receipt
1	January	Southern	Koraput	10/01/2018
2	May	Coastal	Cuttack	22/05/2018
3	June	Western	Sambalpur	10/08/2018
4	July	Northern	Balasore	20/08/2018

APPLICATION FORM

1.	Nature of Disability <i>(Attach Disability Certificate)</i>		Disability %	
2.	Name (In Block Letters)			
3.	Sex	Male / Female		
4.	Father's Name			
5.	Mother's Name			
6.	Permanent Address <i>(Attach Resident/Nativity Certificate)</i>	C/O		
		At		
		PO		
		Via		
		PS		
		Dist		
		Pin		
		State		
7.	Mobile No.			
8.	Are you a resident of Odisha? District to which you belong	Yes / No	
9.	Date of Birth (In Christian Era)		/	
			/	
10.	Particulars of examinations passed <i>(Attach photocopy of all the mark sheets and certificates)</i>	Class	HSE/ CHSE/Degree/UU	Year of Passing
		10th		
		+2		
		+3		

11.	Extra Curricular Activities (if any) <i>(Attach photocopy of all the certificates)</i>	
12.	Present Academic Details (i) Class/Year (ii) Date of admission to the course (iii) Approximate date of termination of the course (iv) Name of College
13.	Documents Attached	(i) Disability Certificate (ii) Resident Certificate (iii) Matric ,Plus two and Plus three certificate (iv) Student ID card issued by Institution (v) Aadhar Card

I Hereby declare that

- i. I will abide by the rules and regulations of the training.
- ii. I will accept the decision of the selection committee which will be final and binding to the Regional and State level Training.
- iii. The statements made in this application are true to the best of my knowledge.

L.T.I / Signature of Candidate

Place:

Date:

Mobile No.