



GOVERNMENT POLYTECHNIC, MUMBAI

(An Autonomous Institute)

49, Kherwadi, Ali Yawar Jung Marg, Bandra (E) Mumbai-400 051

**CENTRAL GOVERNMENT SPONSORED SCHEME FOR
INTEGRATING THE PERSONS WITH DISABILITIES IN
THE MAINSTREAM OF TECHNICAL AND VOCATIONAL
EDUCATION**



APPLICATION FORM FOR ADMISSION TO THE
CERTIFICATE COURSE IN _____

Name of the Candidates (Capital): _____

Fathers Name (Capital): _____

Address for Communication: _____

PIN: _____ PHONE NO. _____

Date of Birth: _____ Age: _____ Sex: _____

Category: _____ Religion: _____ Caste: _____

Educational Details:

Examination Passed	University / Board / School	Year of Passing	Marks Obtained	Percentage of Marks

Experience:

Post/ Designation	Name of Firm/ Company	Address of Firm	Total Experience

Disability:

Disability Type	Percentage of Disability	Period of the Disability

Family Background:

Fathers Service/Business	No. of brothers/Sisters	Mothers Service/Business	Annual income of the family Rs.	No. of persons with Disabilities in the family

I am aware that the information furnished in this application form is true and correct.

Date:

Signature of the Applicant

Place: