ENROLLMENT OF TRAINEES



SWAMI VIVEKANAND NATIONAL INSTITUTE OF REHABILITATION TRAINING AND RESEARCH (SVNIRTAR) Department of Empowerment of Persons with Disabilities (DIVYANGJAN) Ministry of Social Justice & Empowerment, Government of India Olatpur, P.O: Bairoi, Dist- Cuttack-754010 (Odisha) Tel. 0671-2805347, Mob:8093899724 Website:https://svnirtar.nic.in E-Mail:svnirtar@gmail.com

Vocational Training For Persons with Disability Applications are invited from the eligible benchmark Locomotor disability persons in the prescribed form for admission into :

Mobile Phone Repair Technician
 LED light Repairing Technician

Duration: 3 - 4 Months

- Eligibility: 10th Pass (Minimum)
- Age: Not Less Than 15 years Not above 59 years
- > Accommodation will be provided during The training Period
- Personal Assistive Aid's amount of Rs.5000/- will be transferred directly to the trainee account through DBT
- Availability of Application Form (Trainee Profile)s in SVNIRTAR website

For more details log on to <u>https://svnirtar.nic.in</u>





पंगु लंघयते गिरि

Skill Development Training for PwDs

Dept. of Social Work (DSW) <u>Trainee Profile</u>

A

E.E Regd. No:....

Name of Trainee:-

Address:

At:-

Post :-

Dist.	Block/ ULB Name	GP	Village/ Ward No
P.S:-			
Pin Code:-			
State:-			
Contact No (Mob/ WhatsA)	(ac		
Email	er,		
Age:-	Gender:-	Cast:- Gen / SC / ST / C	DBC
	ingle / Married	0 1	
Qualification :-			
Father/Husband Name:-			
Family Status :-	BPL / APL	/ RATION	
Occupation:			
Income (in Rs.) per month/	annum		
No Of Family Members :-			4
Nature of Disability & % :-			14 0
Interest to be enrolled in Co	ourse at SVNIRTAR :-		Nº 4
Enclosure (Photo Copy) :-	Please put $$		ich &
-	• Disability Certificate with Photo	o Copy	0.41
Y	Educational Qualification Certig		- BY
	Caste Certificate	Allow	P,
	• BPL/ Ration Card/Income Certy	ficate	3
	• Aadhar card / Voter Card	ININ	
	Bank Account (First Page of po	uss book with IFSC Code	P Branch & Branch Code)
	 OPD Ticket if attending treatme. 		, Branch & Branch Coucy
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I have not undertaken any other skill training course in the same trade sponsored by the Govt. of India during the period of two years prior to the date of commencement of Training.

I do here by declare that all above information are true to the best of my knowledge. Date:-

Place:-

Signature of the Trainee (PwD)

Signature of Recommending Person/Authority