

ENROLMENT NO.:
CENTRE CODE:

प्रवाह स्वास्थ्य एवं व्यावसायिक प्रशिक्षण परिषद - नई दिल्ली
PRAVAH HEALTH & VOCATIONAL TRAINING COUNCIL (PHVTC)
NEW DELHI (MANAGED BY PRAVAH EDUCATIONAL AND CHARITABLE TRUST - PECT)



An Autonomous Organisation, REGD. By Govt. Of NCT - Delhi Under ITA 1882 Govt. of India
REGD. By NCS-Ministry of Labour and Employment Govt. of India
REGD. By Ministry of Micro, Small & Medium Enterprises (MSME), Govt. of India
REGD. By National Institution For Transforming India, (NITI AYOJ-DARPAH ID-DL/2020/0265263)
REGD. UNDER CR-ACT, 1957, MINISTRY OF HRD Govt. of India
Member NBQP, Quality Council of India
(An ISO 9001-2015 CERTIFIED ORGANISATION)

Applicant's Photo

Applicant Signature

ADMISSION FORM

PERSONAL DETAILS OF THE APPLICANT (IN BLOCK LETTERS)

1. Applicant's Name:
2. Course Applied:
3. D.O.B:
4. Place of Birth(City):
5. Course Code:
6. Admission Cycle (January/July):
7. Centre Name:
8. Father's Name:
9. Father's Mob. No.:
10. Mother's Name:
11. Mother's Mob. No.:
12. Occupation: Father Mother
13. Permanent Address:
14. Postal Address:
15. Applicant Mob No.:
16. Aadhaar No.:
17. Blood Group:
18. Tel. No.: (with STD code)
19. Pin Code:
20. Nationality: Indian Other
21. Gender:
22. Caste: GEN/SC/ST/OBC
23. E-mail:
24. Religion:
25. District:
26. State:
27. Country:
28. Physical Problems/Disability (if any):
29. Educational Details:

Exam	Board/ University	College/ Institute	Marks Obtain	Total Marks	Percentage%	Year of Passing
10th						
10+2						
Degree						
PG Degree						
Diploma						
Other						

30. Do You Have Any Work Experience, Yes No

If Yes: _____

RULES & REGULATIONS

1. Admission will be strictly as per Norms laid down by the institute authority.
2. You will have to carry your I-card with you in the institute campus all the time.
3. You will maintain strict discipline as per the direction of competent Authority as well as the organizational Authorities and head of the institution.
4. All students must keep the institute campus neat, clean and tidy and help to save the water and electricity.
5. All students are liable to follow the rules and regulations that may be instructed by the institute from time to time.

TERMS & CONDITIONS

1. All Courses will be conducted by Pravah health and vocational training council-PHVTC (A unit of PECT regd. By Govt. of NCT Delhi, India)
2. Once the fee is paid by the students, it will not be adjusted, refunded or transferred in any way. If any student leaves the course in mid, he/she will be liable to pay the whole fee.
3. All courses are designed to upgrade the skill enhancement of the candidates in the particular area, there will not be any job responsibility of the institute after training.
4. These courses may be helpful for self employment and private job only.
5. PHVTC has the right to suspend or terminate the enrollment of a candidate at any time.

DECLARATION BY THE APPLICANT

I hereby declare that the information given in this application is true and correct to the best of my knowledge and belief. In case any information given in this application proves to be false or incorrect, I shall be responsible for the consequences. I shall not be entitled to get refund of any fee paid by me for the said course. Any dispute will subject to Muzaffarnagr Jurisdiction (U.P). I also declare that if any information provided by me is found false, my candidature may be rejected at any point of time.

Date:

SEAL OF THE CENTER

CENTER VERIFICATION

Applicant Signature

Signature of the Parent

FOR OFFICE USE ONLY

Eligibility criteria found satisfactory, Yes No If No give reason _____

Full name of counsellor _____ Signature of counsellor _____