

**Application No. \_\_\_\_\_**

**Application Form**  
***“Community Based Rehabilitation Workers”***  
***12th April to 22nd May 2010***

\*Send dully filled in application by **30<sup>th</sup> March 2010** to Academic  
Manager, Mobility India, Bangalore

Name: .....

Sex: .....

Age: .....

Name and address of the Sponsoring Organization:

.....

.....

.....PIN: .....

Tel: ..... E-mail: .....

Do you have a disability: If yes, specify: .....

.....

.....

Educational Qualification: .....

Work experience related to rehabilitation of persons with disabilities:

.....

.....

Parent Organization Address: .....

.....PIN: .....

Tel: .....Fax: .....

**“6 weeks CBR workers training programme\_2010”**

E-mail: .....

**Payment Details**

DD. No: .....

Dated: .....

Drawn on: .....(Bank)

In favour of 'MOBILITY INDIA' for Rs.....

**Payable at Bangalore.**

*\* Use additional paper if necessary*

*For more information contact*

**The Academic Manager  
Mobility India  
1<sup>st</sup> & 1<sup>st</sup> "A" Cross  
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