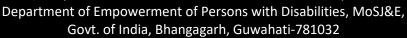


Composite Regional Centre (CRC) for Skill Development, Rehabilitation & Empowerment of Persons with Disabilities, Guwahati (Under the administrative control of SVNIRTAR)





4th Batch CBID-ADMISSION NOTIFICATION

Course	Duration	Minimum		Total	Tuition
		Qualification	Age	Seats	Fees
Certificate	06 months	SSC/10 th standard	Minimum	40	Rs. 2000
Programme in		Examination PASSED	age 18		(Rupees
Community		from any recognized	years at the		Two
Based Inclusive		State or Central	time of		thousand
Development		Board	admission,		only)
(CBID)			upper Age:		
			No Bar		

- This program is recognized by Rehabilitation Council of India (RCI), New Delhi
- Certified personnel, as the 'Divyanga Mitra', will be able to work with governmental or other non-governmental agencies and organizations in both formal and informal sectors
- Last date of application: 25th March, 2025
- Last of admission: 28th March, 2025
- Seats Reservation will be as per Govt. rules
- PWD students with UDID card holder will receive a refund of Rs. 4000 (four thousand) on upon successful completion of the course on first attempt
- Non-PWD students who passed on their first attempt will receive a refund of Rs.
 2000 (two thousand)

Important Dates:

- 1. Admission Notification for 4th Batch CBID 17-03-2025
- 2. Completion of Admission Process- 28-03-2025
- 3. Commencement of Classes 1st April 2025



Composite Regional Centre (CRC) for Skill Development, Rehabilitation & Empowerment of Persons with Disabilities, Guwahati



(Under the administrative control of SVNIRTAR, Odisha)
GMCH, Campus, Hostel Road, Bhangagarh, Guwahati-781032
Department of Empowerment of Persons with disabilities (Divyangjan),
Ministry of Social Justice and Empowerment, Government of India.

Application Form for Admission to CBID Training Programme

FORM No.							Affix your latest passport size photograph (4 cm × 5 cm)
1.	Enrolment						duly Self-attested
wis	sh to apply for admission to (CBID Training	Progra	mme	at	L	
		-					
			ı				
	Name of the Candidate						
	Father's Name						
	Mother's Name						
4.	Complete Postal Address with House No., Street Name, P.O., Pin Code						
5.	Date of Birth (DD/M M/YYYY)						
6.	Nationality						
7.	Mobile No.						
8.	Alternate Mobile No.						
9.	Email ld						
10.	Aadhaar Card						
11.	Whether employed or unemployed Please Tick (✓)				No		
12.	lf employed, furnish the offic	ce address &	Addres	s:			
	Tel No.		Tel No.:				
13.	Whether belongs to SC/ST/OBC/PwD/ EWS Please Tick (✓), If yes, attach self-attested Xerox copy of the certificat		SC		ST	ОВ	BC
	issued by the Competent Au	thority	PWD		EWS		
14.	Academic Qualification	Name of Board/Univ			ear of assing	Subject	ts % of Marks Obtained
	10 th						
	12 th						
	Graduation						
	Post Graduation and above						
	tified copies of academic quag with this form	alification as	mentio	ned i	n the abo	ove colum	n to be attached

Declaration

I hereby declare that I have read and understood the eligibility conditions for admission to CBID Training Programme. I fulfil the minimum eligibility criteria and have provided relevant information and documents in this regard. In the event of any information being found incorrect or misleading, my candidature shall be liable for cancellation by the RCI or concerned Training Institute at any time.

Date:

Plac	e:			Signature of the Candidate			
PLE	ASE NOTE	i:					
1.	2 sets of Xerox copies (duly certified) of the marks sheets & certificates of the qualifying and other examinations.						
2.	Caste Cer	tificate (S	C/ST/OBC	/PWD/EWS), if applicable.			
				For Office Use Only			
Rece	eived by	Post	Hand				
Date	e of receipt	of the For	m				
Eligi	ible/NotE	ligible for	admission	1			
Reas	sons for Re	ejection					
Date	e:			(Name & Signature of admission in-charge with seal of Training Institute)			