

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

(Under administrative control of SVNIRTAR)

Ministry of Social Justice and Empowerment, Govt. of India

Department of Empowerment of Persons with Disabilities

Gauhati Medical College Hospital Campus, Bhangagarh, P.O-Indrapur, Guwahati-781032, Assam

Website : creguwahati.nic.in, Email: creguwahati@gmail.com Ph.No. 0361-3516830

## Academic Session-2025-26

Passport size  
recent  
photograph

**APPLICATION FOR ADMISSION IN TO \_\_\_\_\_ COURSE**

**Application Fee details:** \_\_\_\_\_

(Online/UPI Transaction Id with date)

1. Name of the Applicant: \_\_\_\_\_
2. Name of the Parent/Guardian: \_\_\_\_\_
3. Date of Birth(dd/mm/yy): \_\_\_\_\_ Age in years and months \_\_\_\_\_
4. Gender: Male/Female/Others \_\_\_\_\_ Marital Status \_\_\_\_\_
5. Nationality: \_\_\_\_\_ Domicile \_\_\_\_\_
6. Category: SC ☐ ST ☐ OBC ☐ PwD ☐ GEN ☐ Parents/Siblings of ☐  
Children with disability
7. Address for:

	Correspondence	Permanent
House No./Vill. / Locality/Town/City		
State		
Pin code		
Mobile No:		
Email Id		

8. Details of examinations passed:

	Name of the Exam Passed	Name of the Boards/ university	Year of passing	Total Marks	Marks Obtained	Percentage Obtained	Subjects
1.	SSC/Xth Std						
2.	HSC/XII Std						
3	Any other						

**Declaration:**

I hereby declare that all the information provided by me in this application, to the best of my/our knowledge are true, complete and correct. If found incorrect or false my candidature may be treated as cancelled at any stage.

Applicant's Signature with date: \_\_\_\_\_ Parents/Guardians Signature \_\_\_\_\_

*Note: self attested copy of caste, domicile and income certificates, mark sheets, certificates, online transaction id. Aadhaar etc should be enclosed with the application form.*

ACKNOWLEDGEMENT

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Academic Session-2025-26

Form No:

Received Application from \_\_\_\_\_ S/o/D/o/W/o \_\_\_\_\_ for  
admission to (Name of the Course): \_\_\_\_\_ for the academic session 2025-26.

Date \_\_\_\_\_

Receivers Signature

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