



Continuing Rehabilitation Education (CRE)
Professional Certificate Programme in
Individualised Education Plan (IEP)
April 8 to 12, 2015



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Registration Form for Participation

Name of Candidate: _____

Highest Qualification: _____
(also indicate RCI approved qualification if any)

Are you interested for Paper/case Presentation (if any indicate below)

CRR No./Registration Number if you are registered with any Council: _____

Name and Address of School/Institution you are working with: _____

Postal/Present Address with PIN: _____

Mobile No.: _____

Email ID: _____

Details of Registration Fees (Cheque/Draft/Bank Transfer No.): _____

All payments should be in favour of **Manovikas Charitable Society (RCI)**

Date: _____ Signature _____
Place: _____ Name: _____

*Send this form along with Registration fees before
6 April 2015 to :*



Manovikas Institute for Higher Education
A-267, Surajmal Vihar, Delhi-110092
Tel: 011- 2237 7771, 65422367| Mobile: 9911107772

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