



4th National Abilympics –November, 2014
Chandigarh



Participation Form for Delegation

Form – 1

This application form together with the Registration fee must be sent to NITTTR office by **30th September, 2014**

To be filled by Office:

No.

Date of Receipt / / 2014

1. All contestants should be 15 years and above as on October 1, 2014.

2. Please type or use block letters only.

Name of the Organization

Mailing Address:

.....

Pin Code

Telephone No.: **Fax**

E-mail:

Name of Delegation Leader :

Total No. of delegation members

Number of : Contestants Officials Escorts

No. of Wheel Chair users

Registration Fee Total Rs.

- Registration fee of Rs. 200/- per contestant & Rs.300/- per official / escort is to be paid. If any contestant is participating in two contests, he/she will have to pay Rs. 400/- (Rs. 200/- may be paid at the time of registration and balance Rs.200/- may be paid in cash on the spot subject to date and time of the contest not clashing).

(Draft should be made in favour of **Director, NITTTR, Chandigarh** payable at Chandigarh)

Date : / / 2014

Day / Month /

Signature of Leader of the Delegation

(Stamp of the Organisation)



4th National Abilympics –November, 2014
Chandigarh



Form – 1a

Participation Form for Delegation

Please indicate the number of contestants in individual skill contest. One contestant is allowed to participate in a maximum of 2 skill contests only.

To be filled by Office:
No.
Date of Receipt / / 2014

(Please type or use block letters only)

Name of the Organisation

.....

Vocational Skills Contests

No.	Skill	No. of Contestants
V01.	ARTIFICIAL LIMB MAKING	
V02.	BASKET MAKING	
V03.	CAD - ARCHITECTURE	
V04.	CAD - MACHINERY	
V05.	COMPUTER PROGRAMMING	
V06.	CREATING WEB PAGES	
V07.	DATA PROCESSING – BASIC	
V08.	DATA PROCESSING - ADVANCED	
V09.	ENGLISH DESKTOP PUBLISHING	
V10.	ENGLISH TEXT PROCESSING	
V11.	BLOCK PRINTING ON FABRIC	
V12.	DRESS MAKING WOMEN- BASIC	
V13.	DRESS MAKING WOMEN - ADVANCED	
V14.	TAILORING MEN'S	
V15.	ELCTRONIC ASSEMBLY AND TESTING	
V16.	ELCTRONIC CIRCUIT CONNECTION TECHNIQUE	
V17.	FLORAL ARRANGEMENT	

Vocational Skills Contests

No.	Skill	No. of Contestants
V18.	FURNITURE MAKING	
V19.	JEWELLERY MAKING	
V20.	MECHANICAL ASSEMBLY	
V21.	PC ASSEMBLY	
V22.	PHOTOGRAPHY – OUTDOOR	
V23.	PHOTOGRAPHY - STUDIO	
V24.	POSTER DESIGN ON COMPUTER	
V25.	POSTER DESIGN ON PAPER	
V26.	WOOD CARVING	
V27.	POTTERY	
V28.	SILK HAND PAINTING	
Leisure & Living Skills Contests		
L01.	EMBROIDERY	
L02.	HAND KNITTING	
L03.	PAINTING (WATER COLOUR)	
L04.	CROCHET	
L05.	WASTE REUSE	

Total No. of Contestants :

Date : / / 2014
Day / Month /

Signature of Leader of the Delegation
(Stamp of the Organisation)



**4th National Abilympics –November, 2014
Chandigarh**



Individual Contestant Form

Form – 2

This application form together with the Registration fee of Rs. 200/- per contest per contestant must reach NITTTR Office by **30th September, 2014**

To be filled by Office:
No.
Date of Receipt / / 2014

- 1. All contestants should be 15 years and above as on October 1, 2014** Please attach 2 passport size photographs duly signed by the contestant at the back of the photo.
- 2. Please type or use block letters only.**

Name of the Sponsoring Organisation

Mailing Address :

Pin Code

Telephone No. **Fax**

E-mail :

Name of Contestant:

Are you a lateral Entry Contestant? Yes/No
(If Yes , recommendation of the Regional Vice President with signatures)

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Father's Name **Mother's Name**

Sex : Male Female

Date of Birth: Day

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 Month

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 Year

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Age (as on 1.10.2014): yrs.

Residential Address:

Pin Code:

Telephone No. **Mobile** **E-mail :**

Education :

Vocational Training :

Languages Known : Hindi English Other (Specify)

Are you working : Yes No **If Yes :** Self Employed Employed

If Self Employed, Details of Trade :

If Employed, Designation & Office Address :

City **State** **Pin Code**

Type of Disability: <input type="checkbox"/> Locomotor <input type="checkbox"/> Speech <input type="checkbox"/> Hearing <input type="checkbox"/> Visual <input type="checkbox"/> MR								
Mobility aids being used: <input type="checkbox"/> Wheel Chair <input type="checkbox"/> Crutches <input type="checkbox"/> Walking stick <input type="checkbox"/> Calipers <input type="checkbox"/> Hearing aid <input type="checkbox"/> Others								
Skill Participating in (not more than 2)	Name of Contest...							
<table border="1" style="display: inline-table; width: 80px; height: 20px;"><tr><td>1</td><td> </td><td> </td></tr><tr><td>2</td><td> </td><td> </td></tr></table>	1			2			<table border="1" style="width: 100%; height: 20px;"><tr><td> </td></tr></table>	
1								
2								
(Details of Contest Categories are given in Form 2a.)								

Please attach a copy of the Disability Certificate. In case of mutiple disability, please mention the dominant disability. In case of MR contestants, a certificate of IQ below 70 is required from a Clinical Psychologist.



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Chandigarh



Form – 2a

Application Form for Contestant Only

Please indicate the contest category (categories) in which you wish to participate. Please (✓) the corresponding S. No. If you chose more than one contest category, please mark the order you prefer (1 & 2).

(Please type or use block letters only)

Name of the Organisation

Name of the Contestant

Vocational Skills Contests

No.	Skill	
V01.	ARTIFICIAL LIMB MAKING	.....
V02.	BASKET MAKING	.....
V03.	CAD - ARCHITECTURE	.....
V04.	CAD - MACHINERY	.....
V05.	COMPUTER PROGRAMMING	.....
V06.	CREATING WEB PAGES	.....
V07.	DATA PROCESSING – BASIC	.....
V08.	DATA PROCESSING - ADVANCED	.....
V09.	ENGLISH DESKTOP PUBLISHING	.....
V10.	ENGLISH TEXT PROCESSING	.....
V11.	BLOCK PRINTING ON FABRIC	.....
V12.	DRESS MAKING WOMEN- BASIC	.....
V13.	DRESS MAKING WOMEN - ADVANCED	.....
V14.	TAILORING MEN'S	.....
V15.	ELCTRONIC ASSEMBLY AND TESTING	.....
V16.	ELCTRONIC CIRCUIT CONNECTION TECHNIQUE	.....
V17.	FLORAL ARRANGEMENT	.....

Vocational Skills Contests

No.	Skill	
V18.	FURNITURE MAKING	.....
V19.	JEWELLERY MAKING	.....
V20.	MECHANICAL ASSEMBLY	.....
V21.	PC ASSEMBLY	.....
V22.	PHOTOGRAPHY – OUTDOOR	.....
V23.	PHOTOGRAPHY - STUDIO	.....
V24.	POSTER DESIGN ON COMPUTER	.....
V25.	POSTER DESIGN ON PAPER	.....
V26.	WOOD CARVING	.....
V27.	POTTERY	.....
V28.	SILK HAND PAINTING	.....

Leisure & Living Skills Contests

L01.	EMBROIDERY	.....
L02.	HAND KNITTING	.....
L03.	PAINTING (WATER COLOUR)	.....
L04.	CROCHET	.....
L05.	WASTE REUSE	.....

Date : / / 2014
Day / Month /

Signature of the Contestant



**4th National Abilympics –November, 2014
Chandigarh**



Form – 3

Registration Form for Official / Escort

This application form together with the Registration fee of Rs. 300/- must reach NITTTR Office by **30th September, 2014**

To be filled by office:
No
Date of receipt // 2014

(Please type or use block letters only)

Name of the Sponsoring Organisation

Mailing Address :

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City **State** **Pin Code**

Telephone No. **Mobile** **Fax**

E-mail :

Name of Official / Escort :

Sex : Male Female

Date of Birth: Day Month Year

Residential Address:

City : **State:** **Pin Code:**

Telephone No. **E-mail :**

Education :

Languages Known : Hindi English Other (Please specify)

In case the Official / Escort is a person with disability, please describe :

Type of Disability: Locomotor Speech Hearing Visual MR

Mobility aids being used: Wheel Chair Crutches Walking stick Calipers Hearing aid Others

Date : // 2014

Day / Month /

Signature of the Official / Escort



4th National Abilympics –November, 2014
Chandigarh



Form for Arrival & Departure

Form - 4

This form must reach NITTTR Office address by
30th September, 2014

To be filled by office:

No

Date of receipt / / 2014

Please fill in your travel details to enable the organisers to receive you at the Railway Station/Bus Stand.

(Please type or use block letters only)

Name of the Organisation

Postal Address :

Pin Code

Telephone No. (Including Country code, City / Area code) :

Fax E-mail :

Name of Delegation Leader :

Total No. of delegation members

No. of Wheel Chair users :

Arrival Chandigarh : Date :/...../ 2014 Time : am/pm
Day / Month

Train No. & Name

Station From : to

Departure from Chandigarh : Date :/...../ 2014 Time : am/pm
Day / Month

Train No. & Name Station From

*Candidates traveling by modes of other than train may specifically inform the organisations about their arrival and departure schedules.

Date : / / 2014
Day / Month /

Signature of Leader of the Delegation
(Stamp of the Organisation)