

Diploma in Optometry Institute of Physiotherapy and Rehabilitation Associated Hospital - Satya Hospital

Vishwas Khand-3, Gomti Nagar, Lucknow-226010

Attach a DD for Rs. 200/- favouring Institute of Physiotherapy and Rehabilitation Lucknow, Otherwise the Application will be Rejected
(Please fill in your own Handwriting in Capitals only)

Name in Full Tel. No.

Date of Birth (Attach 10th Pass Certificate or Suitable Proof)

Place of Birth

Nationality Caste

Married or Single

Father's/Husband's Name

Weather prosecuted/ Charged in any offence ever

Mailing Address

Monthly Income of Guardian

Paste Self attested
coloured passport
sized photograph
& attach 2
Photographs

Qualifications :

Class	Board / University	Passing Year	% of Marks in Science Subjects	Subjects
10th or equivalent				
12th or equivalent				
Graduation				
Post Graduation				

Experience if any, in Chronological order

Position held	From	To	Organisation

We hereby agree, if admitted, to abide by the rules & regulations in force of the institute. We hereby declare that above stated particulars are true. Any discrepancy or concealment of fact will result in cancellation of candidature at any stage. **We understand that any part of fee paid once will not be returned under any circumstances.**

(Signature of Candidate)
Date :

(Signature of legal guardian)
Date :

Place :

Place :

For Office use only

Marks in 10+2

Marks obtained in written test

Merit Position

Admitted/Rejected

(Director)