

National Institute for Empowerment of Persons with Multiple Disabilities (Divyangjan) (NIEPMD)

(Dept. of Empowerment of Persons with Disabilities, Ministry of Social Justice & Empowerment, Govt. of India)

National Board of Examination in Rehabilitation

	МД	RK SHEET/ CERTIFICATE COP	RECTION FORM	Date://2021
E	nrolment Number	WONEEN CENTIFICATE COL	<u> </u>	
N	ame of the Student			
(A	astitute Name as per RCI Approval etter)			
Center Code		Course (Code	
Student Phone No		Student	Student email id	
		Correction Request I	 Details	
Requesting Changes in (Please Tick whichever field is required to change)		Data as mentioned duri Enrolment	<u> </u>	Correction Needed (For Printing)
1	Student's Name			
2	Father's Name			
3	Mother's Name/ Spouse Name			
4	Date of Birth			
5	Institute Name (Please attach RCI approval letter)			
No Ple	 As per above your requ To be submit it in the p 	isite, details will be printed or rescribed format on or before be sent only to the following cuments (Proof)	08/09/2021.	
Inc	titution Seal			Sincerely,
IIIS)	munon sear			Course Co- ordinator

Contact Number: _____ (Mandatory)