



Central Council for Research in Yoga & Naturopathy

(Ministry of AYUSH, Government of India)

61-65, Institutional Area, Opposite 'D' Block, Janakpuri,

NEW DELHI -110058

Ph: 28520429, 30, 31 & 32 Fax: 28520435

Website: www.naturopathyday.in Email: ccryn.goi@gmail.com

Admission Notice – 2024-25

Treatment Assistant Training Course (TATC)

Applications are invited for admissions into *Treatment Assistant Training Course (TATC)* of one year duration at Naturopathy Hospital, Rohini, Delhi. **Academic Qualification:** 10th pass. **Number of Seats:** 20, **Last date for submission of Application** is extended upto **30th April, 2024**.

Applications may send to the In-charge, Naturopathy Hospital, Sector-19, Opp. Rohini Jail, Outer Ring Road, Delhi-110085 alongwith with a Demand Draft Rs.200/- (Rupees Two Hundred only) drawn from any Nationalized Bank in favour of Director, CCRYN payable at New Delhi. For more details please visit Council's website www.naturopathyday.in Any addendum/ corrigendum shall be posted only on Council's website.

Director, CCRYN

APPLICATION FORM



Central Council for Research in Yoga and Naturopathy

61-65, Institutional Area, Janakpuri, New Delhi-110 058

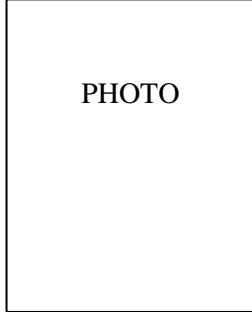
Ph: 011-28520429, 30, 31, & Fax: 28520435

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Treatment Assistant Training Course (TATC)

(One year regular programme)

(Please fill up all the details in capital letters)



1. Name in Capital letters:
2. Father's Name/Husband's Name:.....
3. Date of Birth:.....Age
4. Qualification (please attach self- attested copies of all the certificates):
.....
5. Gender: Male/Female
6. Category (SC/ST/OBC/Others) (Please attach proof in support of category)
.....
7. Present Address:
.....
.....
..... PIN:
8. Permanent Address:
.....
.....
..... PIN:
9. Tel. No: Residence:
Mobile:..... E-Mail:
10. Any other information :

I agree to follow the rules and regulations of the Council for the TATC programme.

Declaration:

I hereby declare that all statements made in the application are true, complete and correct to the best of my knowledge and belief. In the event of any information being found false or incorrect at any point of time, my candidature/admission may be cancelled/terminated without any notice. I also declare that I am a citizen of India by birth/domicile and belong to OBC category (non-creamy layer) for which I will produce relevant certificate.

Strike out whichever is not applicable.

Date:

Signature of Applicant

Place:

For Official Use

Received with thanks Rs.200/- (Two hundred only) as registration fee from Shri /Smt. /Ms. for Treatment Assistant Training Course (TATC) – 2024-25.

Cashier

Admn.-cum-Accounts Officer