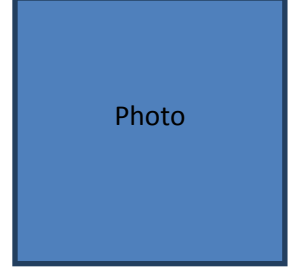


SRI DHARMASTHALA MANJUNATHESHWARA COLLEGE OF AYURVEDA & HOSPITAL, HASSAN

Application for Admission to Short Term Course in Ayurveda :



Name of the applicant in Full :

Father's Name :

Mother's Name :

Age(yrs) :

Gender :

Date of Birth :

Address :

Email :

Mobile No :

Qualification :

College of Graduation/ Post Graduation :

Brief description of present responsibility :

Tick the course interested

COURSE NAME	COURSE CODE	TICK (v)
Child care in ayurveda	CISSDRA-CCA	
Women care in ayurveda	CISSDRA-WCA	
Panchakarma	CISSDRA-PK	
Ksharakarma	CISSDRA-KK	
Ayurveda ahara	CISSDRA-AA	

Signature

Date