



**Dr. D. Y. PATIL SCHOOL OF ALLIED HEALTH SCIENCES**  
**PIMPRI, PUNE - 411 018**  
**Dr. D.Y. PATIL VIDYAPEETH, PUNE**  
(Deemed to be University)  
(Accredited (3<sup>rd</sup> Cycle) by NAAC with a CGPA of 3.64 on a four-point scale at 'A++' Grade)  
ISO 9001: 2015 and 14001: 2015 Certified University

**Expression of Interest for Short Term Courses**

Name of the Candidate -

Address for Communication -

Tick the Course of your interest –

1) Training Course on Immunization Practice	<input type="checkbox"/>
2) Certificate Course on Applied Child Health & Maternal Nutrition	<input type="checkbox"/>

Gender -

Date of Birth -

Telephone -

Mobile -

Email -

Highest Educational Qualifications -

Marks obtained (in%) -

Name of University -

Year of Passing -

Appearing- Yes -  / No -

If Yes please mention name of degree -

Name & Address of the last attended Institute -

**Declaration** - I hereby declared that the above information is true and complete to the best of my knowledge. I am aware that if any information herein is found to be incorrect or incomplete, my admission will be cancelled.

Please send the scan copy of duly filled form to [info.alliedsciences@dpu.edu.in](mailto:info.alliedsciences@dpu.edu.in). Kindly attach all documents to the email (10<sup>th</sup>, 12<sup>th</sup> & Graduate /Other relevant documents, Certificates).

Note – Please click on link for more details - <https://alliedsciences.dpu.edu.in/>

Signature of Candidate