



**NATIONAL CENTRE FOR
PROMOTION OF EMPLOYMENT
FOR DISABLED PEOPLE**

A-77, SOUTH EXTENSION PART-II, NEW DELHI-110 049

Tel. : 011-26265647, 26265648 Fax : 011-26265649

E-mail : secretariat@ncpedp.org

Websites : www.ncpedp.org; www.dnis.org

NC/ 11-12/Youth Conv.

1st October, 2011

Dear *Dr. Mayil Vahanan Natarajan,*

National Centre for Promotion of Employment for Disabled People (NCPEDP) was set up as a registered Trust in 1996 with Smt. Sonia Gandhi as the Founder Chairperson. The mandate of NCPEDP has always been to encourage the employment of disabled people, increase public awareness on disability issues, empower them through appropriate legislation, equip disabled people with educational opportunities and ensure easy and convenient access to all public places.

NCPEDP is organising a National Convention for Youth with Disabilities in New Delhi around 3rd December which is celebrated as the World Disability Day. The objective of the Convention is to reach out to young disabled people and expose them to the social sector movement of India, including disability and other allied fields. This would help us to identify and inspire the next generation leadership of not just the Indian disability sector but also those who could be agents of change in other fields.

The Convention will be a 2 day affair which will include addresses and interactive sessions with well known voices of the social sector (including social entrepreneurs), senior leaders from the corporate world, and bureaucrats as well as politicians.

As a run up to this Convention, we are conducting a nation-wide survey of Universities, Colleges and other institutions for higher education on the status of education of students with disabilities.

We are writing to you with 2 requests:

1: Enclosed please find a Questionnaire for the survey. We would appreciate it a lot if you could please forward this to the concerned official, requesting her/him to please send it back to us ASAP with all the necessary information.

2: Also enclosed is a Nomination Form. We would be very grateful if you could please nominate 2 disabled students from your University/College/Institute to take part in the National Convention for Youth with Disabilities. Please fill a separate form for each nominee. 2 copies of the same are enclosed.

We would be deeply obliged if you please ask the concerned people to send us the filled Questionnaire and the Nomination Forms latest by Tuesday, 25th October, 2011.

Looking forward to hearing from you.

Yours sincerely,

For (Javed Abidi)
Honorary Director



INCLUSION
TO BE A PART & NOT APART



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QUESTIONNAIRE

DETAILS CONCERNING THE ORGANISATION:

Name:

Address:

Telephone No.:	Fax:
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E-Mail:

NAME OF THE OFFICIAL FILLING UP THE FORM:

Job Title / Designation:
E-Mail:

Total number of students:

Male	Female

Total number of disabled students:

Male	Female

Number of students with Visual Impairment:

Male	Female



Number of students with Speech/Hearing impairment:

Male	Female

Number of students with Locomotor Impairment:

Male	Female

Number of students with Mental Disabilities:

Male	Female

Number of students with Other Disabilities:

Male	Female

Do you have a Disability Unit in the campus?

Yes	No

Do you have a Disability Policy?

Yes	No

I _____ (Name & Designation) hereby declare that the information furnished above is authentic and in compliance with the organisational records.

Date: _____

Signature: _____

We will be grateful if you could please E-mail/ Fax/ Courier this questionnaire to us at your earliest convenience, **but not later than Tuesday, 25th October, 2011.**



Specific Achievements:

Details of any other Awards / Recognition received:

Thank you for helping us identify a possible role model. We will be grateful if you could please E-mail / Fax / Courier this Nomination Form to us at your earliest convenience, **but not later than Tuesday, 25th October, 2011.**

You are requested to enclose with the form:

- A recent passport size photograph of the nominee.
- Detailed documentation – e.g. copy of the disability certificate, educational certificates and other awards, citations, etc.



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NOMINATION FORM 2

DETAILS CONCERNING THE NOMINEE:

Name:

Nature and extent (percentage) of disability?

Address:

Telephone No.:

Fax No.:

E-mail:

Date of Birth:

Educational Background:



Specific Achievements:

Details of any other Awards / Recognition received:

Thank you for helping us identify a possible role model. We will be grateful if you could please e-mail / fax / courier this Nomination Form to us at your earliest convenience, but not later than **Tuesday, 25th October, 2011.**

You are requested to enclose with the form:

- A recent passport size photograph of the nominee.
- Detailed documentation – e.g. copy of the disability certificate, educational certificates and other awards, citations, etc.