



**CENTRAL LEPROSY TEACHING AND RESEARCH INSTITUTE,  
CHENGALPATTU TN 603 001**

The Apex Leprosy institute of Directorate General of Health Services,  
Ministry of Health & Family Welfare, Govt. of India

**Online training of health functionaries in  
National Leprosy Eradication Programme (NLEP)**

Schedule of online training during May to Aug. 2021

Sr. No.	Potential beneficiaries/ participants	Date of training
1.	PG Community Medicine/Public Health/Epidemiology	17 <sup>th</sup> to 19 <sup>th</sup> May, 2021
2.	PG Dermatology, Venereology & Leprosy	31 <sup>st</sup> May to 4 <sup>th</sup> Jun, 2021
3.	State/Dist. Leprosy Officers	21 <sup>st</sup> to 25 <sup>th</sup> June, 2021
4.	Data Entry Operators/MIS officials	6 <sup>th</sup> to 7 <sup>th</sup> July, 2021
5.	Physiotherapists	26 <sup>th</sup> to 29 <sup>th</sup> July, 2021
6.	State/Dist. Leprosy Officers	9 <sup>th</sup> to 12 <sup>th</sup> Aug. 2021
7.	PG Community Medicine/Public Health/Epidemiology	2 <sup>nd</sup> to 4 <sup>th</sup> Aug. 2021

The nominations to be sent through Head of the Department/Office in the following format at least 5 days before the commencement of the training programme to [nodalofficercltri.tnchn@nic.in](mailto:nodalofficercltri.tnchn@nic.in).

APPLICATION FORM (Online Training)																					
*Name & date of the training course: .....											*Photo										
*Name of the applicant (CAPITAL LETTERS): FIRST NAME      MIDDLE NAME      FAMILY NAME																					
*Age/Gender: ..... No. of years of service: .....																					
*Current designation: ..... *Office address: .....																					
Bachelor's Degree: ..... Institution (Name & Address): ..... Govt/Pvt.																					
Masters Degree: ..... Institution (Name & Address): ..... Govt/Pvt.																					
*Candidate Mob. No.											*Candidate Email ID										
*HoD Contact No.											*HoD Email ID										
*HOI Contact No.											*HOI Email ID										
Additional relevant information:																					
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\*Mandatory information.

HOI: Head of Institution/Office

