## Application Form for conducting Driver Training Program (DTP)

Name of the Organization:		
Address of the Organization:		
Contact Person:		
Telephone / Mobile No.		
Email Id:		
No. of Vehicles		
	Make of Vehicle	Nos.
Vehicle Details		
Vehicle Details Manpower Details (Nos. of Drivers)		
Manpower Details (Nos. of Drivers)		
Manpower Details (Nos.	1. 2. 3.	

- 1. Certificate of participation will be issued to the participantswho attend this program.
- 2. Fleet owners who wish to train their drivers on DTP, need to fill the format and send to the following address:

Northern Region (New Delhi)	Chief Regional Coordinator, PCRA, SanrakshanBhawan, 10 BhikajiCama
	Place, New Delhi- 110066, Phone 011-26198856, Fax: 011-26109668,
	Email – <u>pcra@pcra.org</u>
Eastern Region (Kolkata)	Chief Regional Coordinator, PCRA, 2 Gariahat Road, Dhakuria, 6 <sup>th</sup> Floor,
	IOCLBhawan, Kolkata – 700068, Phone: 033-24145092, 24145088 Fax:
	033-24145091, Email – <u>pcraer@pcra.org</u>
Western Region (Mumbai)	Regional Coordinator, PCRA, C-5, KesvaBuillding, Gr. Floor, BandraKurla
	Complex, Bandra East, Mumbai- 400051, Phone – 022-26592181, Fax:
	022-6590034, Email: <u>pcrawr@pcra.org</u>
Southern Region (Chennai)	Chief Regional Coordinator, PCRA T.M.B. Mansion, 1 <sup>st</sup> Floor, 739, Anna
	Salai, Chennai-600002, Phone – 044-28524772, 28520417, Fax: 044-
	28521662 Email: pcrasr@pcra.org

3. For further details, please contact Chief Regional/ Regional Coordinator.