



**THE WORLD COMMUNITY SERVICE CENTRE
DIRECTORATE OF SMART - WCSC
APPLICATION FOR ARULNITHIYAR COURSE**



(Please Fill the Form in Capital Letters Only)

1. Name : _____

Write in BLOCK Letters

2. Father /Guardian Name : _____

3. Gender : Male Female Third Gender

4. Date Of Birth Age:
(Attach Certificates)

5. Present Occupation : _____

6. Marital Status : Married UnMarried Others

7. Residential Address :

Pincode:	Cell:

8. Anboli Subscription No : _____

9. BGM course completed date: _____(Certificate attached)

10. Time Allocated for Service in a week : _____(Hours)

11. Which date you want to attend the Arulnithiyar course: _____

12. Course fee paid Rs/- _____ Cash /Axis Bank Pay in Slip, (Axis Bank, Pollachi, Type-SB, A/c No: 916010005884141 / Vethathiri Maharishi Kundalini Yoga and Kayakalpa Research Foundation / IFSC Code: UTIB0000339)

Place:

Date:

Applicant's Signature

The applicant recommended through this, is well known to me. He /she is completed the BGM course & rendering regular service in our Trust. I certify that the person would put good service in WCSC.

(i) Zone name : _____

(ii) Trust name: _____

(iii) Place of trust: _____

Trust, Incharge / PO signature
Rubber Stamp with AF.No.

Note:

1. Those who attend the Arulnithiyar course they should be in a comfortable position to spend time and Money for rendering SKY Service.
2. The Applicant should have good health and physical fitness & able to do the demo Sky exercise, perfectly.
3. The Applicant should complete **20 years** of age and not exceeding **65 years**.
4. The Applicant has passed at least 8th STD (Certificate enclosed).
5. The Applicant should pay Rs.1000/-for common hall Accommodation and Rs. 1300/- for 4 Bed room. (Advance booking required)
6. If room Accommodation is not available in your specified date, your name will be shifted to next course date.
7. Application can be made to Assistant Professor Course only after completion of Arulnithiyar course and rendering service at Trust.
8. The applicant should be filled without any omission and correction.
9. The applicants should apply in Form No. 6. The Forms are available at zone office or Download from the **Web:** www.vethathiri.edu.in / SMART page

Address: The Application be sent to The Administrative Officer, Arivuthiru kovil, Artperum jothi nagar, Aliyar, Pollachi -642101. Ph.no:04253 -288733,288755.cell no:75982 38733,7598259733., Email : aaliyar@vethathiri.ac.in