

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		
Vehicle Details	<u>Make of Vehicle</u>	<u>Nos.</u>
Manpower Details (Nos. of Drivers)		
Suitable Dates (Please Mention 3 Dates)	1.	
	2.	
	3.	

1. Certificate of participation will be issued to the participants who 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, Sanrakshan Bhawan, 10 Bhikaji Cama Place, New Delhi- 110066, Phone 011-26198856, Fax: 011-26109668, Email – pcra@pcra.org
Eastern Region (Kolkata)	Chief Regional Coordinator , PCRA, 2 Gariahat Road, Dhakuria, 6 th Floor, IOCL Bhawan, Kolkata – 700068, Phone: 033-24145092, 24145088 Fax: 033-24145091, Email – pcraer@pcra.org
Western Region (Mumbai)	Regional Coordinator , PCRA, C-5, Kesva Building, Gr. Floor, Bandra Kurla Complex, Bandra East, Mumbai- 400051, Phone – 022-26592181, Fax: 022-6590034, Email: pcrawr@pcra.org
Southern Region (Chennai)	Chief Regional Coordinator , PCRA T.M.B. Mansion, 1 st 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.
4. Any individual driver, who is interested in undergoing Driver Training Programme, may contact us at the above address.