



KMCT

COLLEGE OF ALLIED HEALTH SCIENCES

Affiliated to Kerala University of Health Sciences and approved by Govt. of Kerala

TO WHOMSOEVER IT MAY CONCERN

This is to certify that the information in the attached documents is verified by me and is true to the best of my knowledge.




Principal
Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602



KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I Mr. Tajo A.P (Name) Assistant Professor (Designation) from
Department of MLT humbly request you to consider my application for a
reimbursement for the purpose of ~~national/international Fellowships~~ / /financial support for ~~Advanced~~
~~studies/Collaborative research/PhD.~~ /Conference participation in the academic year
2018-2019.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Tajo A.P
Signature: Tajo
Place: Manassery
Date: 09/01/2018

ForWARDED
[Signature]

Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602



KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I..... Mr. Dinu C. P.....(Name) Assistant professor.....(Designation) from
Department of M.L.T..... humbly request you to consider my application for a
reimbursement for the purpose of ~~national/international~~ Fellowships // financial support for ~~Advanced-~~
~~studies/Collaborative research/PhD.~~ /Conference participation in the academic year
2018-2019.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name:

Dinu C.P

Signature

Dinu C.

Place:

Manassery

Date:

09/01/2018

Immanuel
[Signature]

Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602



KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I, Ms. Akhila C. (Name) Assistant Professor (Designation) from
Department of M.L.T. humbly request you to consider my application for a
reimbursement for the purpose of ~~national/international Fellowships~~ // financial support for ~~Advanced~~
~~studies/Collaborative—research/PhD.~~ /Conference participation in the academic year
2018-2019.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name:

Akhila C

Signature

Akhila C

Place:

Manassery

Date:

09/01/2019

Principal
[Signature]

Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602



KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I.....Deeshma.....(Name) Assistant Professor.....(Designation)
from Department of MLT..... humbly request you to consider my application
for a reimbursement for the purpose of ~~national/international Fellowships~~ / /financial support for
~~Advanced studies/Collaborative research/PhD~~ /Conference participation in the academic year
2018-2019.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Deeshma

Signature [Signature]
1/12/2018

Place: Manasseery

Date: 1/12/2018



[Signature]
[Signature]

Principal
KMCT College of Allied Health Sciences
P.O. Manasseery, Mukkam
Kozhikode, Pin - 673602

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I, Mrs Deeshma.....(Name) Assistant Prof.....(Designation) from
Department of MLT..... humbly request you to consider my application for a
reimbursement for the purpose of ~~national/international~~ Fellowships / ~~financial~~ support for Advanced
studies/Collaborative—research/PhD. /Conference participation in the academic year
.....2018-2019.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Deeshma P

Signature Deeshma P

Place: Manassery

Date: 09/01/2019

Frmvandy
[Signature]



Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I Dr. N. Vijay Selvan.....(Name) Professor.....(Designation)
from Department of BPT..... humbly request you to consider my application
for a reimbursement for the purpose of ~~national/international Fellowships~~ / /financial support for
~~Advanced studies/Collaborative research/PhD~~ /Conference participation in the academic year
2018 to 2019.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Dr. Vijay Selvan N

Signature N. Vijay Selvan

Place: Manassery

Date: 1/8/2018



Forwarded
[Signature]
Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I Dr. N. Vijay Selvan (Name) HOD (Designation)
from Department of BPT humbly request you to consider my application
for a reimbursement for the purpose of ~~national/international Fellowships~~ / /financial support for
~~Advanced studies/Collaborative research/PhD~~ /Conference participation in the academic year
2018 - 2019.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Dr. N. Vijay Selvan

Signature

N. Vijay Selvan

Place: Manasseey

Date: 1/3/2019



Forwarded

[Signature]
Principal

KMCT College of Allied Health Sciences
P.O. Manasseey, Mukkam
Kozhikode, Pin - 673002

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I, Prof. Santheep S (Name) Principal (Designation) from
Department of MLT humbly request you to consider my application for a
reimbursement for the purpose of ~~national/international Fellowships / /financial support for Advanced
studies/Collaborative research/PhD.~~ /Conference participation in the academic year
.....2018-2019.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Prof - Santheep S

Signature [Handwritten Signature]

Place: Manassery

Date: 26/12/2019

[Handwritten Signature]

Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602



KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I Prof. Sandeep S (Name) Principal (Designation) from
Department of MLT humbly request you to consider my application for a
reimbursement for the purpose of national/international Fellowships / /financial support for Advanced
studies/Collaborative research/PhD. /Conference participation in the academic year
2018-2019.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Prof. Sandeep S

Signature

Place: Manassery

Date: 25/8/2019



Founded

Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I.....Prof. Santhep.....(Name).....Principal.....(Designation) from
Department of MLT..... humbly request you to consider my application for a
reimbursement for the purpose of ~~national/international~~ Fellowships / /financial support for ~~Advanced~~
~~studies/Collaborative~~ research/PhD. /Conference participation in the academic year
2018-2019.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name:

Prof. Santhep - S

Signature

Place:

Manassery

Date:

20/05/2019

Fornuthel
[Signature]



Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I, Prof. Vijay Selvan (Name) HOD (Designation) from Department of BPT humbly request you to consider my application for a reimbursement for the purpose of ~~national/international Fellowships / / financial support for Advanced studies/Collaborative research/PhD. /Conference—participation~~ in the academic year 2018-2019. I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Prof. Vijay Selvan N

Signature N. Vijay Selvan

Place: Manassery

Date: 22/10/2018



Forwarded
[Signature]

Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Kozhikode
P.O. Manassery, Kozhikode
Kozhikode, Pin - 673002

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I.....Binisha.M.M.....(Name) Assistant Professor (Designation) from
Department of BPT..... humbly request you to consider my application for a
reimbursement for the purpose of ~~national/international Fellowships~~ // financial support for ~~Advanced~~
~~studies/Collaborative—research/PhD.~~ /Conference participation in the academic year
2019-2020.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Binisha M.M

Signature [Signature]

Place: Manassery

Date: 1/03/2020



[Signature]

Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

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To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I.....Mrs. Binisha . M.M.....(Name) Assistant Professor.....(Designation) from
Department of BPT..... humbly request you to consider my application for a
reimbursement for the purpose of ~~national/international Fellowships~~ / /financial support for ~~Advanced~~
~~studies/Collaborative research/PhD:~~ /Conference participation in the academic year
2019-2020.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Binisha M.M

Signature [Signature]

Place: Manassery

Date: 24/01/2020



[Signature]

[Signature]

Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

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To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I MR. Tajo AP (Name) Assistant Prof. (Designation) from Department of MLT humbly request you to consider my application for a reimbursement for the purpose of ~~national/international Fellowships / /financial support for Advanced studies/Collaborative research/PhD~~ /Conference participation in the academic year 2019-2020.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Mr. Tajo A.P

Signature Tajo

Place: Manassery

Date: 9/1/2020



Emmanuel

Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Makkam
Kozhikode, Pin - 673602

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I.....Dhinu.....(Name) Assistant Professor.....(Designation) from
Department of MLT..... humbly request you to consider my application for a
reimbursement for the purpose of national/international Fellowships // financial support for Advanced
studies/Collaborative research/PhD /Conference participation in the academic year
2019-2020.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Dhinu

Signature Dhinu

Place: Manassery

Date: 9/1/2020



Fouzanah
[Signature]

Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

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To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I..... Miss. Shyamli T.K..... (Name). Assistant Prof...... (Designation) from
Department of MHT..... humbly request you to consider my application for a
reimbursement for the purpose of ~~national/international~~ Fellowships / /financial support for ~~Advanced~~
~~studies/Collaborative research/PhD.~~ /Conference participation in the academic year
2019-2020.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Shyamli T.K
Signature: [Signature]

Place: Manassery
Date: 09/01/2020

[Signature]
[Signature]



Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Makkam
Kozhikode, Pin - 673602

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I..... Mr. Irshad P.P (Name) Assistant Professor (Designation) from
Department of MLT humbly request you to consider my application for a
reimbursement for the purpose of national/international-Fellowships / /financial support for Advanced
studies/Collaborative—research/PhD— /Conference participation in the academic year
2019-2020.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Irshad P.P

Signature [Signature]

Place: Manassery

Date: 09/01/2019

Forwarded.

[Signature]

Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602



KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I, Miss. Sansi P. K (Name) Assistant professor (Designation) from
Department of MLT humbly request you to consider my application for a
reimbursement for the purpose of ~~national/international~~ Fellowships / /financial support for ~~Advanced~~
~~studies/Collaborative~~ research/~~PhD~~ /Conference participation in the academic year
2019-2020.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Sansi P. K

Signature 

Place: Manassery

Date: 09/01/2020

Forwarded


Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Makkam
Kozhikode, Pin - 673602



KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I Miss. Chithra Manjusha (Name) Assistant Prof (Designation) from
Department of MCT humbly request you to consider my application for a
reimbursement for the purpose of ~~national/international Fellowships / /financial support for Advanced~~
~~studies/Collaborative research/PhD.~~ /Conference participation in the academic year
2019-2020.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Chithra Manjusha

Signature Chithra Manjusha

Place: Manassery

Date: 09/01/2020

Forwarded.

[Signature]

Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602



KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I Mrs. Rajeswari B.S (Name) Lecturer (Designation) from Department of MLT humbly request you to consider my application for a reimbursement for the purpose of ~~national/international Fellowships /~~ //financial support for ~~Advanced studies/Collaborative~~ research/PhD. /Conference participation in the academic year 2019-2020. I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Rajeswari B.S
Signature: Rajeswari

Place: Manassery
Date: 09/01/2020

Forwarded
[Signature]



Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I..... Mrs. Jayasudha E (Name)..... Lecturer (Designation) from
Department of..... MLT..... humbly request you to consider my application for a
reimbursement for the purpose of ~~national/international~~ Fellowships / /financial support for ~~Advanced~~
studies/Collaborative—research/PhD. /Conference participation in the academic year
2019-2020.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Jayasudha

Signature [Signature]

Place: Manassery

Date: 09/01/2020

[Signature]
[Signature]

Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602



KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I Mrs. Deeshma P. (Name) Assistant Prof. (Designation) from
Department of MKT humbly request you to consider my application for a
reimbursement for the purpose of ~~national/international~~ Fellowships / /financial support for ~~Advanced-~~
~~studies/Collaborative—research/PhD.~~ /Conference participation in the academic year
2019-2020.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Deeshma P

Signature [Signature]

Place: Manassery

Date: 1/1/20

Forwarded
[Signature]



Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I, Prof. Vijay Selvan (Name) HOD (Designation) from
Department of B.P.T humbly request you to consider my application for a
reimbursement for the purpose of national/international Fellowships / /financial support for Advanced
studies/Collaborative research/PhD. /Conference participation in the academic year
2019-2020. I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Prof. Vijay Selvan N
Signature N. Vijay Selvan

Place: Manassery
Date: 24/10/2019

F. Manassery
[Signature]

Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602



KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I.....Dr. Vijay Selvan.....(Name).....HOD.....(Designation) from
Department ofBPT..... humbly request you to consider my application for a
reimbursement for the purpose of national/international Fellowships / /financial support for Advanced
studies/Collaborative—research/PhD: /Conference participation in the academic
year 2019-2020.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Prof. Vijay Selvan. N

Signature N. Vijay Selvan

Place: Manasseey

Date: 01/03/2020

Friendly



Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mulkam
Kozhikode, Pin - 673602



KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I Mrs. Safa.c (Name) Associate professor (Designation) from
Department of BPT humbly request you to consider my application for a
reimbursement for the purpose of ~~national/international Fellowships~~ // financial support for ~~Advanced
studies/Collaborative research/PhD.~~ /Conference participation in the academic year
2019-2020 I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Safa.c
Signature Safa.c

Place: Manassery
Date: 01/03/2020



Er. Manassery
[Signature]
Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I, Binisha .M.M (Name) Assistant Professor (Designation)
from Department of BPT humbly request you to consider my application
for a reimbursement for the purpose of ~~national/international Fellowships~~ / /financial support for
~~Advanced studies/Collaborative research/PhD~~ . /Conference participation in the academic year
2019 - 2020.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Binisha .M.M

Signature [Signature]
1/2/2020

Place: Manassery

Date: 1/2/2020



[Signature]
Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukh...
Kozhikode, Pin - 673002

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I Prof. Santhrap S (Name) Principal (Designation) from Department of HLT humbly request you to consider my application for a reimbursement for the purpose of ~~national/international~~ Fellowships / ~~financial support for Advanced studies/Collaborative research/PhD~~ / ~~Conference~~—participation in the academic year 2020-2021. I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Prof. Santhrap S

Signature

Place: Manassery

Date: 2/2/21

Forwarded
[Signature]



Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Makkam
Kozhikode, Pin - 673602

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

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To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I, Prof. Santhep S (Name) Principal (Designation) from Department of MCT humbly request you to consider my application for a reimbursement for the purpose of ~~national/international Fellowships / /financial support for Advanced studies/Collaborative research/PhD. /Conference participation~~ in the academic year 2020-2021. I am attaching the supporting documents along with this letter.

Yours sincerely,

Name:

Signature Prof. Santhep S

Place: Manassery

Date: 1/1/21



Forwaded
[Signature]
Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I Mrs. Soumya V (Name) H.O.D (Designation) from
Department of MLT humbly request you to consider my application for a
reimbursement for the purpose of ~~national/international Fellowships / /financial support for Advanced~~
~~studies/Collaborative research/PhD: /Conference~~ participation in the academic year
2020-2021. I am attaching the supporting documents along with this letter.

Yours sincerely,

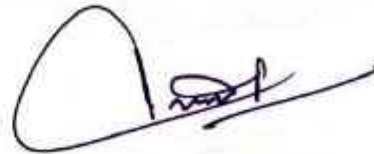
Name: Soumya V

Signature 

Place: Manassery

Date: 26/6/20

Forwarded



Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Makkam
Kozhikode, Pin - 673602

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To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I, Prof. Dr. Vijay Selvan N (Name) HOD (Designation) from Department of BPT humbly request you to consider my application for a reimbursement for the purpose of ~~national/international Fellowships~~ // financial support for ~~Advanced studies/Collaborative research/PhD~~ /Conference participation in the academic year 2020-2021.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Prof. Dr. Vijay Selvan

Signature N. Vijay Selvan

Place: Manassery

Date: 2/1/2021



Forwarded
Chand

Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

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To
The Principal
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Respected sir,

I, Prof. N. Vijay Selvan (Name) HOD (Designation) from
Department of BPT humbly request you to consider my application for a
reimbursement for the purpose of ~~national/international Fellowships / / financial support for Advanced~~
~~studies/Collaborative research/PhD. /Conference~~ participation in the academic year
2021-2022.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Prof. Vijay Selvan

Signature N. Vijay Selvan

Place: Manassery

Date: 12/05/2022

[Signature]

Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602



KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I Dr. N. Vijay Selvan.....(Name) HOD.....(Designation)
from Department of BPT..... humbly request you to consider my application
for a reimbursement for the purpose of ~~national/international Fellowships / /financial support for~~
~~Advanced studies/Collaborative research/PhD. /Conference participation~~ in the academic year
2021-2022.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Dr. N. Vijay Selvan

Signature N. Vijay Selvan

Place: Manassery

Date: 20/01/2022



[Signature]

Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mulkam
Kozhikode, Pin - 673602

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I, Prof. Dr. Vijay Selvan (Name) HOD (Designation) from
Department of BPT humbly request you to consider my application for a
reimbursement for the purpose of national/international Fellowships / ~~financial support for Advanced~~
~~studies/Collaborative research/PhD- /Conference—~~ participation in the academic
year 2021-2022.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Prof. Vijay Selvan

Signature N. Vijay Selvan

Place: Manassery

Date: 6/6/2021



Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I Prof. Dr. Vijay Selvan (Name) HOD (Designation) from
Department of BPT humbly request you to consider my application for a
reimbursement for the purpose of national/international Fellowships / /financial support for Advanced
studies/Collaborative research/PhD- /Conference participation in the academic
year 2021-2022 I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Prof. Vijay Selvan-N

Signature N. Vijay Selvan

Place: Manassery

Date: 5/5/2021

Forwarded



Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602



KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I, Dr. N. Vijay Selvan (Name) HOD (Designation)
from Department of BPT humbly request you to consider my application
for a reimbursement for the purpose of ~~national/international Fellowships~~ / financial support for
~~Advanced studies/Collaborative research/PhD~~ /Conference participation in the academic year
2021-2022. I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Dr. N. Vijay Selvan

Signature N. Vijay Selvan

Place: Manassery

Date: 1/12/2022



Forwarded
[Signature]

Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mullakkal
Kozhikode, Pin - 673002

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I, Dr. N. Vijay Selvan (Name) HOD (Designation)
from Department of BPT humbly request you to consider my application
for a reimbursement for the purpose of ~~national/international Fellowships~~ / /financial support for
~~Advanced studies/Collaborative research/PhD~~ /Conference participation in the academic year
2021-2022.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Dr. N. Vijay Selvan

Signature N. Vijay Selvan

Place: Manasseery

Date: 1/11/2022



Forwarded
[Signature]

Principal
KMCT College of Allied Health Sciences
P.O. Manasseery, Muttam
Kozhikode, Pin - 673602

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I, Dr. N. Vijay Selvan.....(Name)..... HOD.....(Designation)
from Department of BPT..... humbly request you to consider my application
for a reimbursement for the purpose of ~~national/international Fellowships~~ / /financial support for
~~Advanced studies/Collaborative research/PhD~~ /Conference participation in the academic year
2021-2022.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Dr. N. Vijay Selvan

Signature

N. Vijay Selvan

Place: Manasseery

Date: 10/11/2022



Forwarded
[Signature]
Principal
KMCT College of Allied Health Sciences
P.O. Manasseery, Mukkam
Kozhikode, Pin - 673002

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I..... Dr. N. Vijay Selvan.....(Name)..... HOD.....(Designation)
from Department of BPT..... humbly request you to consider my application
for a reimbursement for the purpose of ~~national/international Fellowships~~ / /financial support for
Advanced studies/Collaborative research/PhD /Conference participation in the academic year
2021-2022..... I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Dr. N. Vijay Selvan

Signature N. Vijay Selvan

Place: Manasseery

Date: 20/11/2022

Forwarded
[Signature]



Principal
KMCT College of Allied Health Sciences
P.O. Manasseery, Mukkam
Kozhikode, Pin - 673602

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I.....Dr. Gladys Kamalam.....(Name).....Associate Prof.....(Designation) from
Department of DPT..... humbly request you to consider my application for a
reimbursement for the purpose of national/international Fellowships / /financial support for Advanced
studies/Collaborative research/PhD. /Conference—participation in the academic
year 2021-2022.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Dr. Gladys Kamalam
Signature: G. Gladys

Place: Manassery
Date: 24/4/22

Forwarded



[Signature]

Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I.....Ms. Nimya.....(Name) Assistant Professor.....(Designation) from
Department of BPT..... humbly request you to consider my application for a
reimbursement for the purpose of national/international-Fellowships / /financial support for Advanced
studies/Collaborative—research/PhD. /Conference participation in the academic year
2021-2022.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Ms. Nimya . N . k

Signature [Handwritten Signature]

Place: manassery

Date: 25/12/2021



[Handwritten Signature]
[Handwritten Signature]

Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I..... Asly .P.....(Name) Lecturer.....(Designation)
from Department of Optometry..... humbly request you to consider my application
for a reimbursement for the purpose of ~~national/international Fellowships~~ / /financial support for
~~Advanced studies/Collaborative research/PhD~~ /Conference participation in the academic year
2022-2023.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Asly
Signature: Asly

Place: Manassery
Date: 16/8/2022

Immanuel
Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukka
Kozhikode, Pin - 673602



KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I.....Archana.K.P.....(Name).Lecturer.....(Designation)
from Department ofoptometry..... humbly request you to consider my application
for a reimbursement for the purpose of ~~national/international Fellowships / /financial support for~~
~~Advanced studies/Collaborative research/PhD~~ /Conference participation in the academic year
2022-2023.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Archana.K.P

Signature [Signature]
16/8/22

Place: Manassery

Date: 16/8/2022



[Signature]

Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Kuttanadu
Kochi, Pin - 673 932

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I, Prof. Santhoop S.....(Name)..... Principal.....(Designation) from Department of MLT..... humbly request you to consider my application for a reimbursement for the purpose of ~~national/international Fellowships / /financial support for Advanced studies/Collaborative research/PhD. /Conference—~~ participation in the academic year 2021-2022.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name:

Signature

Prof. Santhoop-S

Place: Manassery

Date: 7/6/21



Forwarded

[Signature]

Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I, Prof. Dr. Vijay Selvan (Name) HOD (Designation) from
Department of BPT humbly request you to consider my application for a
reimbursement for the purpose of ~~national/international~~ Fellowships / ~~financial support for Advanced~~
~~studies/Collaborative~~ research/~~PhD.~~ /Conference participation in the academic
year 2021-2022.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Prof. Dr. Vijay Selvan

Signature N. Vijay Selvan

Place: Manassery

Date: 20/2/2022

Forwarded,

[Signature]



Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I.....Sifana Thasni.....(Name) Assistant Professor.....(Designation)
from Department ofM.L.T..... humbly request you to consider my application
for a reimbursement for the purpose of ~~national/international Fellowships~~ / /financial support for
~~Advanced studies/Collaborative research/Ph.D.~~ /Conference participation in the academic year
.....2022-23.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Sifana Thasni

Signature [Signature]
23/11/2022

Place: Manassery

Date: 23/11/2022



[Signature]
[Signature]

Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I Mrs. Shifana (Name) Assistant Professor (Designation) from
Department of MHT humbly request you to consider my application for a
reimbursement for the purpose of ~~national/international~~ Fellowships / /financial support for ~~Advanced~~
~~studies/Collaborative~~ research/PhD. /Conference participation in the academic year
2022-2023. I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Shifana

Signature: [Signature]

Place: Manassery

Date: 24/07/2022

[Signature]
Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602



KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I.....Aparna.....(Name) Assistant Professor.....(Designation)
from Department ofMLT..... humbly request you to consider my application
for a reimbursement for the purpose of ~~national/international Fellowships~~ / /financial support for
~~Advanced studies/Collaborative research/PhD~~ . /Conference participation in the academic year
2022-2023.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Aparna

Signature Aparna

Place: Manassery

Date: 1/12/2022



Emmanuel
Chand
Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673802

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I.....Mrs. Ananya S.....(Name).....Asst. Professor.....(Designation) from
Department ofMCT..... humbly request you to consider my application for a
reimbursement for the purpose of national/international Fellowships / /financial support for ~~Advanced~~
~~studies~~/Collaborative research/PhD. /Conference participation in the academic year
2022-2023.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: ANANYA . S

Signature [Handwritten Signature]

Place: Manassery

Date: 22/6/2022

[Handwritten Signature]

Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602



KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I Mrs. Amritha P (Name) Lecturer (Designation) from
Department of MLT humbly request you to consider my application for a
reimbursement for the purpose of ~~national/international~~ Fellowships / /financial support for ~~Advanced~~
~~studies/Collaborative~~ research/PhD. /Conference participation in the academic year
2022-23.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Amritha P.

Signature [Signature]

Place: Manassery

Date: 22/07/2022

[Signature]

Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602



KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I..... Mrs. Nayana.K. Babu (Name)..... Assistant Professor (Designation) from
Department of M.L.T..... humbly request you to consider my application for a
reimbursement for the purpose of ~~national/international Fellowships-~~ /financial support for ~~Advanced~~
~~studies/Collaborative—research/PhD.~~ /Conference participation in the academic year
2022-2023.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Nayana.K. Babu

Signature [Signature]

Place: Manassery

Date: 02/12/2022

[Signature]
Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602



KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I.....Akhila.....(Name) Lab Technician.....(Designation)
from Department ofMLT..... humbly request you to consider my application
for a reimbursement for the purpose of ~~national/international Fellowships~~ / /financial support for
~~Advanced studies/Collaborative research/PhD.~~ /Conference participation in the academic year
...2022-2023.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Akhila

Signature Akhila
1/12/22

Place: Manassery

Date: 1/12/2022

Fonseca


Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673002

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I.....Susi.....(Name)Assistant Professor.....(Designation)
from Department ofMIT..... humbly request you to consider my application
for a reimbursement for the purpose of ~~national/international Fellowships /~~ /financial support for
~~Advanced studies/Collaborative research/PhD.~~ /Conference participation in the academic year
.2022-2023.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Susi

Signature Susi

Place: Manassery

Date: 1/12/2022



Emmanuel
Chand

Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukikode
Kozhikode, Pin - 673002

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I, Sifana Thasri.....(Name) Assistant Professor.....(Designation)
from Department of M.H.T..... humbly request you to consider my application
for a reimbursement for the purpose of ~~national/international Fellowships/~~ /financial support for
~~Advanced studies/Collaborative research/PhD./~~Conference participation in the academic year
2022-2023.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Sifana Thasri

Signature [Signature]
1/12/2022

Place: Manassery

Date: 1/12/2022



[Signature]
Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Malappuram
Kozhikode, Pin - 673502

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I, Prabhisha.....(Name) Associate Professor.....(Designation)
from Department of M.I.T..... humbly request you to consider my application
for a reimbursement for the purpose of ~~national/international Fellowships~~ / /financial support for
~~Advanced studies/Collaborative research/PhD~~ /Conference participation in the academic year
2022-2023.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Prabhisha

Signature Prabhisha

Place: Manassery

Date: 1/12/2022



Emwanchy
[Signature]

Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I, Mrs. Vipina (Name) Assistant Prof. (Designation) from
Department of MLT humbly request you to consider my application for a
reimbursement for the purpose of ~~national/international Fellowships~~ / /financial support for ~~Advanced
studies/Collaborative research/PhD.~~ /Conference participation in the academic year
2022-2023. I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Vipina

Signature

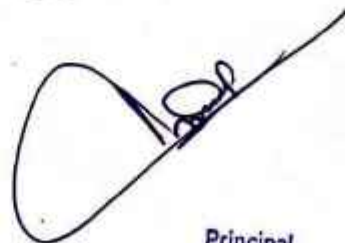
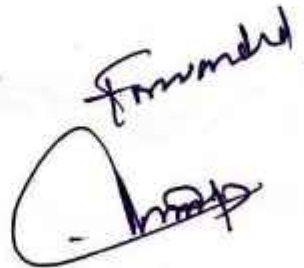


Place:

Manassery

Date:

1/12/2022



Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I Mrs. Deeshma (Name) Assistant Prof (Designation) from Department of MLT humbly request you to consider my application for a reimbursement for the purpose of ~~national/international~~ Fellowships / /financial support for ~~Advanced studies/Collaborative research/PhD~~ /Conference participation in the academic year 2022-2023. I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Deeshma .P

Signature Deeshma

Place: Manassery

Date: 24/07/2022

Furukhan
[Signature]

Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602



KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I Mrs. Deeshma (Name) Assistant Prof. (Designation) from
Department of MLT humbly request you to consider my application for a
reimbursement for the purpose of ~~national/international~~ Fellowships // financial support for ~~Advanced~~
~~studies/Collaborative research/PhD~~ /Conference participation in the academic year
2022-2023.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Deeshma.P

Signature



Place: Manassery

Date: 02/12/2022



Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602



KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I, Prof. Vijay Selvan (Name) HOD (Designation) from
Department of BPT humbly request you to consider my application for a
reimbursement for the purpose of ~~national/international Fellowships / /financial support for Advanced~~
~~studies/Collaborative—research/PhD. /Conference—participation~~ in the academic year
2021-2022. I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Prof. Dr. Vijay Selvan

Signature N. Vijay Selvan

Place: Manassery

Date: 25/4/2022



Forwarded
[Signature]

Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Makkam
Kozhikode, Pin - 673602

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I.....Prof. Vijay Selvan.....(Name).....Head of Department.....(Designation) from
Department ofBPT..... humbly request you to consider my application for a
reimbursement for the purpose of ~~national/international~~ Fellowships / /financial support for ~~Advanced~~
studies/Collaborative research/PhD. /Conference participation in the academic year
2022-2023.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Prof. Dr. Vijay Selvan N

Signature N. Vijay Selvan

Place: Manassery

Date: 24/07/2022

Forwarded

[Signature]

Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602



KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I Dr. Vijay Selvan (Name) HOD (Designation) from
Department of BPT humbly request you to consider my application for a
reimbursement for the purpose of ~~national/international~~ Fellowships / /financial support for ~~Advanced~~
~~studies/Collaborative~~—research/PhD. /Conference participation in the academic year
2022-2023.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Prof. Dr. Vijay Selvan

Signature N. Vijay Selvan

Place: Manassery

Date: 10/10/2022



Principal
Principal
KMCT College of Allied Health Sciences
P.O. Manassery Mukkam
Kozhikode, Pin - 673602

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I, Dr. N. Vijay Selvan (Name) HOD (Designation)
from Department of BPT humbly request you to consider my application
for a reimbursement for the purpose of ~~national/international Fellowships~~ / /financial support for
~~Advanced studies/Collaborative research/PhD~~ /Conference participation in the academic year
28/2022-2023 I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Dr. N. Vijay Selvan

Signature N. Vijay Selvan

Place: Manassery

Date: 28/11/2022



Emmanuel
[Signature]

Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I, Dr. N. Vijay Selvan (Name) HOD (Designation)
from Department of BPT humbly request you to consider my application
for a reimbursement for the purpose of ~~national/international~~ Fellowships / ~~financial support for~~
~~Advanced studies/Collaborative research/PhD. /Conference participation~~ in the academic year
2022 - 2023.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Dr. N. Vijay Selvan

Signature N. Vijay Selvan

Place: Manasseey.

Date: 12/12/2022

Forwarded

[Signature]

Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602



KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I.....Prof. Vijay Selvan.....(Name) H.O.D.....(Designation) from
Department of B.P.T..... humbly request you to consider my application for a
reimbursement for the purpose of ~~national/international-Fellowships / /financial-support for Advanced~~
~~studies/Collaborative research/PhD; /Conference participation~~ in the academic year
2022-2023.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Prof. Dr. Vijay Selvan

Signature N. Vijay Selvan

Place: Manassery

Date: 23/07/2022

Forwarded
[Signature]

Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602



KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I.....Dr. Gladis Kamalam.....(Name) Associate Professor.....(Designation) from
Department ofBPT..... humbly request you to consider my application for a
reimbursement for the purpose of ~~national/international-Fellowships / /financial-support-for Advanced~~
~~studies/Collaborative—research/PhD. /Conference~~ participation in the academic
year2022-2023.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name:

Dr. Gladis Kamalam

Signature

[Handwritten Signature]

Place: Manassery

Date: 1/7/22

Forwarded.

[Handwritten Signature]

Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602



KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I.....Dr. Gladis kamalam.....(Name).....Associate Prof......(Designation) from
Department ofBPT..... humbly request you to consider my application for a
reimbursement for the purpose of national/international Fellowships / /financial support for Advanced
studies/Collaborative research/PhD. /Conference participation in the academic
year 2022-2023.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name:

Dr. Gladis kamalam

Signature

S. Jacky

Place:

Manassery

Date:

23/6/22

Forwarded

[Signature]
Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602



KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I..... Dr. Gladis Kamalam (Name) Associate Prof. (Designation) from
Department of B.P.T. humbly request you to consider my application for a
reimbursement for the purpose of ~~national/international Fellowships / /financial support for Advanced~~
~~studies/Collaborative research/PhD. /Conference—~~participation in the academic
year 2022 - 2023.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name:

Dr. Gladis Kamalam

Signature

S. Gladis

Place:

Manassery

Date:

2/7/22

Forwarded

[Signature]

Principal

KMCT College of Allied Health Sciences
P.O. Manassery, Makkam
Kozhikode, Pin - 673602



KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I.....Dr. Gladis Kamalam.....(Name).....Professor.....(Designation) from
Department ofBPT..... humbly request you to consider my application for a
reimbursement for the purpose of ~~national/international Fellowships- / financial support for Advanced~~
~~studies/Collaborative research/PhD- /Conference~~ participation in the academic
year 2022-2023.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name:

Dr. Gladis Kamalam

Signature

Gladis

Place:

Manassery

Date:

10/8/23

Favourably

[Signature]

Principal

KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602



KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I.....Dr. Gladis Kamalam.....(Name).....Associate Professor.....(Designation) from
Department of.....B.P.T..... humbly request you to consider my application for a
reimbursement for the purpose of ~~national/international Fellowships /~~ /financial support for ~~Advanced-
studies/Collaborative~~ research/PhD. /Conference participation in the academic
year 2022-2023.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name:

Dr. Gladis Kamalam

Signature

[Handwritten Signature]

Place:

Manassery

Date:

1/5/22

Forwarded.



[Handwritten Signature]

Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673502

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I.....Mr. Drishya Suresh V (Name) Assistant Professor (Designation) from
Department of BPT..... humbly request you to consider my application for a
reimbursement for the purpose of ~~national/international~~ Fellowships // financial support for ~~Advanced~~
~~studies/Collaborative~~ research/PhD. /Conference participation in the academic year
2022-2023.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Drishya Suresh V
Signature: [Signature]

Place: Manassery
Date: 24/07/2022

[Signature]
[Signature]

Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602



KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I, Ms. Drishya Suresh V (Name) Assistant Professor (Designation) from Department of B.P.T humbly request you to consider my application for a reimbursement for the purpose of ~~national/international Fellowships~~ / financial support for ~~Advanced studies/Collaborative research/PhD.~~ /Conference participation in the academic year 2022-2023. I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Drishya Suresh V
Signature: [Handwritten Signature]

Place: Manassery
Date: 25/11/2022

[Handwritten Signature]
Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602



KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I Mrs. Josmy (Name) Assistant Prof. (Designation) from Department of BPT humbly request you to consider my application for a reimbursement for the purpose of ~~national/international~~ Fellowships / /financial support for ~~Advanced~~ studies/Collaborative—research/PhD. /Conference participation in the academic year 2022-2023. I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Josmy
Signature: [Signature]

Place: Manassery
Date: 24/07/2022

[Signature]
[Signature]

Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602



KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I, Mm. JOSmy Thomas (Name) Assistant Professor (Designation) from Department of B.P.T humbly request you to consider my application for a reimbursement for the purpose of ~~national/international Fellowships~~ // financial support for ~~Advanced studies/Collaborative research/PhD.~~ /Conference participation in the academic year 2022-2023. I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Josmy
Signature: [Signature]

Place: Manassery

Date: 25/11/2022



KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I.....Nimya .N:ls.....(Name) Assistant Professor.....(Designation)
from Department of BPT..... humbly request you to consider my application
for a reimbursement for the purpose of ~~national/international Fellowships~~ / /financial support for
Advanced studies/Collaborative research/PhD. /Conference participation in the academic year
2022-2023.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Nimya .N.k

Signature



Place: Manassery

Date: 03 - 03 - 2023



Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602



KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I, Ms. Nimya N.K (Name), Assistant Professor (Designation) from
Department of BPT humbly request you to consider my application for a
reimbursement for the purpose of ~~national/international~~ Fellowships / /financial support for ~~Advanced~~
~~studies/Collaborative~~ research/PhD. /Conference participation in the academic year
2022-2023.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Ms. Nimya N.K

Signature Nimya

Place: Manassery

Date: 5/03/2023

Founded

[Signature]

Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602



KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I, Ms. Swathi Manoharan.....(Name)..... Assistant Prof......(Designation) from Department of DPT..... humbly request you to consider my application for a reimbursement for the purpose of ~~national/international~~ Fellowships / /financial support for ~~Advanced studies/Collaborative—research/PhD.~~ /Conference participation in the academic year 2022-2023.....I am attaching the supporting documents along with this letter.

Yours sincerely,

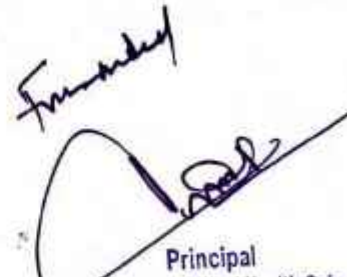
Name: Ms. SWATHI MANOHARAN K.M

Signature: 

Place: MANASSERY

Date: 14/11/2022




Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I, Swathi Manoharan (Name) Assistant professor (Designation) from Department of BPT humbly request you to consider my application for a reimbursement for the purpose of ~~national/international Fellowships~~ //financial support for Advanced studies/~~Collaborative research/PhD~~ /Conference participation in the academic year 2022-2023. I am attaching the supporting documents along with this letter.

Yours sincerely,

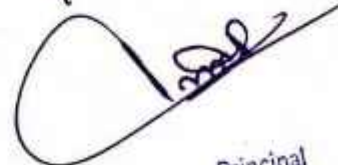
Name: MS. SWATHI MANOHARAN K.M

Signature 

Place: Manassery

Date: 05/03/2023



Principal


Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

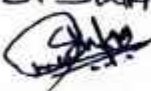
To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I Ms. Swathi Manoharan (Name) Assistant Prof. (Designation) from Department of DPT humbly request you to consider my application for a reimbursement for the purpose of ~~national/international Fellowships / /financial support for Advanced studies/Collaborative research/PhD~~ /Conference participation in the academic year 2022-2023. I am attaching the supporting documents along with this letter.

Yours sincerely,


Name: Ms. Swathi Manoharan K.M

Signature 

Place: MANASSERY

Date: 24/07/2022



Principals


Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Muttam
Kozhikode, Pin - 673002

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I Kashmeera . P . K (Name) Assistant Professor (Designation)
from Department of BPT humbly request you to consider my application
for a reimbursement for the purpose of ~~national/international Fellowships~~ / /financial support for
Advanced studies/Collaborative research/Ph.D. /Conference participation in the academic year
2022 - 2023.....I am attaching the supporting documents along with this letter.

Yours sincerely, 1

Name: Kashmeera . P . K

Signature (Kashmeera)

Place: Manassery

Date: 3/3/2023



Emmanuel

(Signature)

Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Malappuram
Kozhikode, Pin - 673002

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I..... Mrs. Kashmeera P.K.....(Name)..... Assistant. Prof.....(Designation) from
Department of BPT..... humbly request you to consider my application for a
reimbursement for the purpose of ~~national/international Fellowships /~~ /financial support for Advanced
~~studies/Collaborative research/PhD.~~ /Conference participation in the academic
year 2022-2023.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Kashmeera P.K

Signature



Place: MANASSERY

Date: 05/03/2023



Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602



KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I Mrs. Kashmeera (Name) Assistant Professor (Designation) from Department of BPT humbly request you to consider my application for a reimbursement for the purpose of ~~national/international Fellowships~~ / /financial support for ~~Advanced studies/Collaborative research/PhD.~~ /Conference participation in the academic year 2022-2023.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Kashmeera

Signature [Signature]

Place: Manassery

Date: 24/07/2022



[Signature]
[Signature]

Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I, Mrs. Reshina Ali.....(Name) Assistant Professor.....(Designation) from Department of Optometry..... humbly request you to consider my application for a reimbursement for the purpose of ~~national/international~~ Fellowships / /financial support for Advanced studies/~~Collaborative research/PhD.~~ /Conference participation in the academic year 2022-2023.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Reshina Ali

Signature [Handwritten Signature]

Place: Manassery

Date: 24/07/2022

[Handwritten Signature]

Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602



KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I..... Mrs. Archana .k.P......(Name)..... lecturers.....(Designation) from Department of Optometry..... humbly request you to consider my application for a reimbursement for the purpose of ~~national/international Fellowships / /financial support for Advanced studies/Collaborative research/PhD.~~ /Conference participation in the academic year 2022-2023.....I am attaching the supporting documents along with this letter.

Yours sincerely,

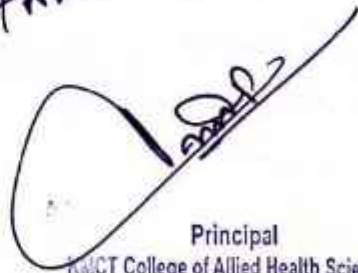
Name: Archana.k.P

Signature



Place: Manassery

Date: 24/07/2022



Principal

KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602



KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I Dr. Manju Suresh.....(Name) Assistant Professor.....(Designation) from Department of CPT..... humbly request you to consider my application for a reimbursement for the purpose of ~~national/international~~ Fellowships / /financial support for ~~Advanced studies/Collaborative—research/PhD.~~ /Conference participation in the academic year 2022-2023....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Dr. Manju Suresh

Signature [Signature]

Place: Manassery

Date: 24/07/2022

[Signature]
[Signature]



Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mulkam
Kozhikode, Pin - 673602

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I, Somya.....(Name) Associate Professor.....(Designation)
from Department of MLT..... humbly request you to consider my application
for a reimbursement for the purpose of ~~national/international Fellowships~~ //financial support for
~~Advanced studies/Collaborative research/PhD~~ /Conference participation in the academic year
2022-2023.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Somya

Signature [Signature]

Place: Manassery

Date: 1/12/2022

[Signature]

Principal

KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673022



KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I Prof. Dr. Santhep. S (Name) Principal (Designation) from
Department of MLT humbly request you to consider my application for a
reimbursement for the purpose of ~~national/international Fellowships / /financial support for Advanced~~
~~studies/Collaborative research/PhD. /Conference participation~~ in the academic year
2022-2023. I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: [Signature]

Signature Prof. Dr. Santhep. S

Place: Manassery

Date: 24/07/2022



[Signature]
[Signature]

Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602

[Signature]

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I Dr. N. Vijay Selvan (Name) HOD (Designation)
from Department of BPT humbly request you to consider my application
for a reimbursement for the purpose of ~~national/international Fellowships~~ / /financial support for
~~Advanced studies/Collaborative research/PhD~~ /Conference participation in the academic year
2022-2023.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Dr. N. Vijay Selvan

Signature

N. Vijay Selvan

Place: Manassery

Date: 24/12/2022



Forwarded
[Signature]

Principal

KMCT College of Allied Health Sciences
R.O. Manassery, Mukka
Kozhikode, Pin - 673602

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I Prof. Dr. Santhap (Name) Principal (Designation) from
Department of MLT humbly request you to consider my application for a
reimbursement for the purpose of ~~national/international Fellowships~~ // financial support for ~~Advanced
studies/Collaborative research/PhD~~ /Conference participation in the academic year
2022-2023. I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Prof. Dr. Santhap

Signature [Signature]

Place: Manassery

Date: 30/6/2022

Forwarded
[Signature]

Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Makkam
Kozhikode, Pin - 673602



KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I, Mrs. Soumya V (Name) HOD (Designation) from
Department of MLT humbly request you to consider my application for a
reimbursement for the purpose of ~~national/international Fellowships /~~ ~~financial support for Advanced~~
~~studies/Collaborative research/PhD.~~ /~~Conference~~ participation in the academic
year 2022-2023.....I am attaching the supporting documents along with this letter.

Yours sincerely,

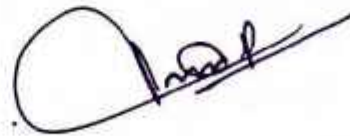
Name: Soumya V

Signature 

Place: Manassery

Date: 22/4/23

Forwarded



Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I..... Mrs. Arshitha Babu.....(Name) Lab Technician.....(Designation) from Department of MLT..... humbly request you to consider my application for a reimbursement for the purpose of ~~national/international Fellowships~~ // financial support for ~~Advanced studies/Collaborative research/PhD~~ /Conference participation in the academic year 2022-2023.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Arshitha Babu

Signature Arshitha

Place: Manassery

Date: 15/11/2022



Forwarded
[Signature]

Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Makkam
Kozhikode, Pin - 673602

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I.....Mrs. Shabana.....(Name).....Assistant Professor.....(Designation) from Department ofOptometry..... humbly request you to consider my application for a reimbursement for the purpose of ~~national/international Fellowships / /financial support for Advanced studies/Collaborative research/PhD.~~ /Conference participation in the academic year 2022-2023.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Mrs. Shabana
Signature: Shabana

Place: Manassery
Date: 30/6/2022



Forwarded
[Signature]

Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To
The Principal
KMCT College of Allied Health Sciences

Respected sir,

I..... Mrs. Shahana Thasini.....(Name)..... Lab Attender.....(Designation) from Department of MLT..... humbly request you to consider my application for a reimbursement for the purpose of ~~national/international Fellowships / /financial support for Advanced studies/Collaborative research/PhD.~~ /Conference participation in the academic year 2022-2023.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Shahana Thasini

Signature Shahana Thasini

Place: Manassery

Date: 15/11/2022



Forwarded
[Signature]

Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602

KMCT COLLEGE OF ALLIED HEALTH SCIENCES

Requisition Form

Request form for availing reimbursement under the following sections National/International fellowships/financial support for advanced studies/Collaborative research or Conference participation

To

The Principal


KMCT College of Allied Health Sciences

Respected sir,

I, Mrs. Soumya .V (Name) Associate Professor (Designation) from Department of MLT humbly request you to consider my application for a reimbursement for the purpose of national/international Fellowships // financial support for Advanced studies/Collaborative research/PhD /Conference participation in the academic year 2022-2023. I am attaching the supporting documents along with this letter.

Yours sincerely,

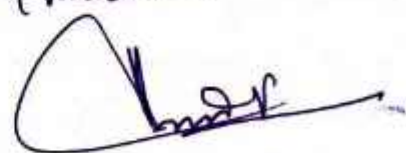
Name: Mrs. Soumya

Signature 

Place: Manassery

Date: 30/6/2022



Forwarded


Principal
KMCT College of Allied Health Sciences
P.O. Manassery, Mukkam
Kozhikode, Pin - 673602