



# 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



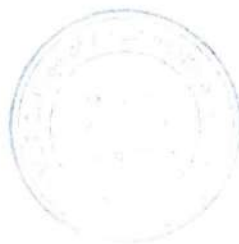


# KMCT

## COLLEGE OF ALLIED HEALTH SCIENCES

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

### 3.1.2 Any additional information



Principal  
KMCT College of Allied Health Sciences  
M. 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, 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, Mankam  
Kozhikode, Pin - 673032

**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, Safceera.....(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  
2022-2023.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Safceera

Signature Safceera  
1/12/2022

Place: Manassery

Date: 1/12/2022



Immanuel  
Chand

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 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  
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: 1/8/2019



Funded

[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, Ananya.....(Name) Assistant Professor.....(Designation )  
from Department of MIT..... 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 Ananya.S

Place: Manassery

Date: 1/12/2022



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, Dr. N. Vijay Selvan (Name) H.O.P. (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  
2021-2022 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.....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  
2022-2023.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Deeshma

Signature [Signature]  
1/12/2022

Place: Manassery

Date: 1/12/2022



[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, 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  
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, Anusuthi Aravindan.....(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: Anusuthi Aravindan

Signature [Signature]

Place: Manassery

Date: 16/8/2022



[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.....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  
2022-2023.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Deeshma

Signature [Signature]  
1/12/2022

Place: Manassery

Date: 1/12/2022



[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, Aparna.....(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  
.....2022-23.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Aparna

Signature ABM

Place: Manassery

Date: 23/11/2022

Emmanuel  
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, 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  
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 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: Aparna

Signature Aparna

Place: Manassery

Date: 1/12/2022



Emmanuel  
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 2021-2022.....I am attaching the supporting documents along with this letter.

Yours sincerely,

Name: Dr. Manju Suresh

Signature [Signature]

Place: Manassery

Date: 14/10/2022



Emmanuel  
[Signature]

Principal  
KMCT College of Allied Health Sciences  
P.O. Manassery, Mukkam  
Kozhikode, Pin - 673612



# 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 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: Susi

Signature Susi

Place: Manassey

Date: 1/12/2022



Fouzanul  
Chand

Principal  
KMCT College of Allied Health Sciences  
P.O. Manassey, 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 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: 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.....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: 10/10/2022



[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.....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, 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.....Archana.K.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: Archana.K.P

Signature [Signature]  
26/8/22

Place: Manassery

Date: 16/8/2022



[Signature]

Principal  
KMCT College of Allied Health Sciences  
P.O. Manassery, Kuttanada  
Kottarakkuda, 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 of M.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 Thasni

Signature [Signature]  
11/12/2022

Place: Manassery

Date: 1/12/2022



[Signature]  
Principal

KMCT College of Allied Health Sciences  
P.O. Manassery, Kozhikode,  
Kozhikode, Pin - 673692

