

NCSC for DA

(National Career Service Centre for Differently Abled)

USER Manual for Differently Abled Representative

NIC- NCSC for DA-USER-1.0

Abstract: This User Manual provides complete description of the functions covered for NCSC For DA (National Career Service Centre for Differently Abled). This document is intended for the stakeholders of the system.

Keywords: Software requirement specification, Differently Abled People, state User, Center User, Code Directory, Query, MIS Report

M/Labour & Employment Division
National Informatics Centre (MeitY), India

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Amendment log

Version	Date	Brief Description	Section Change
1.0	18.09.2018	Covers the functionality of Registration of Differently Abled, Application Accept Or Reject, Enroll, Refused and Dropout	1 st Draft

Table of Contents

1	Registration on Portal	1
1.1	New User Sign-up.....	1
1.2	Registered User	2
1.3	Apply Application	2
1.3.1	Apply Application (By Differently Abled)	2
1.4	Save as Draft/Edit.....	4
1.5	Final Submission.....	5

1 Registration on Portal

Differently Abled Person need to apply online for training, needs registration first on the Portal. The Portal requires name,date of birth, email, mobile number to get registered.

भारत सरकार
Government of India

श्रम एवं रोजगार मंत्रालय
Ministry of Labour & Employment

रोजगार महानिदेशालय
Directorate General of
Employment

National Career Service Centre for Differently Abled [NCSC For DA]

Department Login

Register Yourself with us!

Name*
नाम

Date Of Birth*
जन्म तिथि

Email Id
ई-मेल

Mobile No.*
मोबाइल नम्बर

Verification Code*
सत्यापन कोड

Enter your name

01 Jan 195

Enter Valid Email ID

Mobile Number

Code: 8 5 7 6 3 4

Submit Cancel

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Total hits : 3

1.1 New User Sign-up

The signup form may ask for minimum information (like Name, Date of Birth, mobile, etc. Mobile number is mandatory to get OTP verification. After filling OTP Number your registration will done Successfully and get registration id on Mobile and Email id (**Email Id** is not **Mandatory**. If You will give then you will get success message with Registration On your email id).

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M/o Labour & Employment

रोजगार महानिदेशालय
Directorate General of
Employment

National Career Service Centre for Differently Aabled [NCSC For DA]

एक काम बदलता है जीवन

Department Login

Welcome to NCSC For DA Portal

New Applicant Signup

Registration No.*
पंजीकरण संख्या

Date Of Birth*
जन्म तिथि

Verification Code*
सत्यापन कोड

Enter Registration Id

Enter Date of Birth

Enter Below Code

6 8 1 7 2 4

Submit Cancel

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Total hits : 3

1.2 Registered User

The system lets the registered user to login through Apply For Training/Course form with details like Registration No and Date Of Birth.

1.3 Apply Application

1.3.1 Apply Application (By Differently Aabled)

The system facilitates to submit the Student details. The form comprises of details -

Applicant details [Name, Father Name, Category, Date of Birth, Disability Type, Percentage of Disability, Bench Mark Disability, IQ, Aadhaar Number, Mobile Number, Email-Id, NCS Registration no. , Monthly Income of Parents.]

- Student details [Address (Premise Number, Sub Locality/Street/ Colony Name, Locality/city/village), Pin Code , State, District.]
- Bank details [Bank Name, IFSC code, A/C Number, Bank Branch Address]
- Education Details

[Select Education -

- 1.Literate – Basic School Education, Drop Out Before Xth class.
2. Illiterate - No School Education.
3. Formal Qualification – X th class Pass Out and Above.

]

- Upload Document [Disability Certificate, Caste Certificate, Upload Photograph, 10th certificate (Mandatory, if you selected Formal Qualification.)]
- Select the State(where you want to do course [Mandatory field]

1.4 Save as Draft/Edit

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Government of India

प्रधान मंत्री कार्यालय
Ministry of Labour & Employment

Ministry of Labour & Employment

Mon Dec 31 2018, 4:48:44 PM

Welcome Mukesh Kumar

रोजगार मन्त्रालय
Directorate General of Employment

National Career Service Centre for Differently Abled [NCSC For DA]

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Department Login

Back

Print

Registration Id/पंजीयन पहचान:-44966735

Govt. of India
Ministry of Labour & Employment
NCSC for Differently Abled, Delhi
Particulars of Candidates for Admission 2018-19

Candidate Details/उम्मीदवार विवरण			
Name/नाम	Mukesh Kumar		
Gender/लिंग	Male		
Date of Birth/जन्म की तारीख	31/12/1995 (22 Year)		
Applied Course State/अर्जित राज्य	Delhi		
Regional Office of course/पाठ्यक्रम के क्षेत्रीय कार्यालय	NCSC for DA - New Delhi NCSC For DA, V.R.C.Bldg, 9-10-11, Main Vikas Marg Extension (Near Shakti Mukund Hospital) Kankardooma, Delhi-110092	Preferred Courses/कोर्स	Domestic Appliances,
Course Enrolled / पाठ्यक्रम	Automobile	Period Of Course/कोर्स की तारीख	Start Date: 28/12/2018 End Date: 27/12/2019
Bank Name/बैंक का नाम	DENA BANK	Bank IFSC Code/बैंक आईएफएससी कोड	DBIR0256988
Bank A/c No./बैंक खाता संख्या	1000000000002569	Bank Branch Address/बैंक शाखा का पता	New Delhi
Category/वर्ग	ST	Registered Mobile No/ मोबाइल नंबर	7894646313
Email Id/ईमेल आईडी	mukesh@kumar.com	Any Technical Qualification/ तकनीकी योग्यता	No Technical Qualification
Disability Type/विकलांगता प्रकार	HH(Hearing Handicapped)	Percentage(% of Disability/विकलांगता का प्रतिशत (%)	50%
Bench Mark Disability	Bench Mark	IQ	IQ Test
N.C.S Registration No/एन सी एस सी पंजीकरण संख्या	Ncs12569/205	Monthly Income of Parents/माता-पिता की मासिक आय	9000
Guardian Name/अभिभावक का नाम	PP Kumar	Adhar Number/अधार संख्या	XXXX-XXXX-3333
Permanent Address/स्थायी पता	255, Dichoon Kalan, najafgarh, new delhi, West, Delhi, 110045		
Select the Education/शिक्षा का चयन करें	Literate	Vocational Training/व्यवसायिक प्रशिक्षण	No
Period From	01/12/2018	Period To	31/12/2019
Intake Number of NCSC-DAs / NCSC-DAs की प्रवेश संख्या	Have you under gone training in this trade organised by centre earlier/ क्या आपने इस कोर्स में पहले केंद्र द्वारा आयोजित किया था?		
Stipend Received/आवृत्ति प्राप्त किया था?	No		

Caste Certificate

FORM OF CASTE CERTIFICATE FOR SC/ST

This is to certify that Shri/Shrimati/Kumar _____ Son/Daughter of _____ Village/Town _____ /District/Division* _____ of the _____ State/Union Territory belongs to the _____ Caste*/Tribe which is recognised as a Scheduled Caste/Tribe under :

*The Constitution Scheduled Castes Order, 1950.
*The Constitution Scheduled Tribes Order, 1950.
*The Constitution (Scheduled Castes) (Union Territories) (Part C States) Order, 1951;
*The Constitution (Scheduled Tribes) (Union Territories) (Part C States) Order, 1951;
[As amended by the Scheduled Castes and Scheduled Tribes List (Modification) Order, 1956, the Bombay Reorganisation Act, 1960, the Punjab Reorganisation Act, 1966, the State of Himachal Pradesh Act, 1970, the North Eastern Areas (Reorganisation) Act, 1971 and the Scheduled Castes and Scheduled Tribes Orders (Amendment) Act, 1976].
The Constitution (Andaman and Nicobar Islands) Scheduled Tribes Order, 1956.
The Constitution (Amendment and Khasi) Scheduled Castes Order, 1959, as amended by the Scheduled Castes and Scheduled Tribes Orders (Amendment) Act, 1976.
The Constitution (Dadra and Nagar Haveli) Scheduled Castes Order, 1962.
The Constitution (Dadra and Nagar Haveli) Scheduled Tribes Order, 1962.
*The Constitution (Pondicherry) Scheduled Castes Order, 1964.
*The Constitution (Uttar Pradesh) Scheduled Tribes Order, 1967.
*The Constitution (Goa, Daman and Diu) Scheduled Castes Order, 1968.
*The Constitution (Goa, Daman and Diu) Scheduled Tribes Order, 1968.
*The Constitution (Nagaland) Scheduled Tribes Order, 1970.
*The Constitution (Nagaland) Scheduled Castes Order, 1978.
*The Constitution (Nagaland) Scheduled Tribes Order, 1978.
*The Constitution (Jammu & Kashmir) Scheduled Tribes Order, 1989.
*The Constitution (SC) Orders (Amendment) Act, 1990.
*The Constitution (ST) Orders (Amendment) (Performance Act) 1991.

Disability Certificate

FORMAT OF MEDICAL CERTIFICATE FOR PERSON WITH DIABILITIES (PwD)

NAME AND ADDRESS OF THE INSTITUTE/HOSPITAL _____
Certificate No. _____ Date: _____

1. This is to certify that Smt/Shri/Kum _____ son/daughter of Shri _____ age _____ Male/Female having identification marks as below: _____ is suffering from permanent disability of following category:

A. Locomotor or cerebral palsy:
(i) BL - Both legs affected but not arms.
(ii) BA - Both arms affected : a) Impaired reach b) Weakness of grip
(iii) OL - One leg affected (right or left): a) Impaired reach b) Weakness of grip c) Ataxic
(iv) OA - One arm affected (right or left): a) Impaired reach b) Weakness of grip c) Ataxic
(v) BH - Stiff back and hips (cannot sit or stoop)
(vi) MW - Muscular Weakness and limited physical endurance.

B. Blindness or Low Vision : (i) B-Blind (ii) PB- Partially Blind
C. Hearing Impairment: (i) D-Deaf (ii) PD- Partially Deaf. (Delete the category whichever is not applicable)

Paste here your recent colour photograph showing the disability (The photograph should be attested by the Chairperson of the Medical Board)
Signature of the candidate

1.5 Final Submission

In a View Detail Check Box is their to Accept DecelARATION, If you Select Deceleration, Then Click on Submit Button to Finalize it.

Your Registration Form Send to Administrator to Enrolled for Education.