

STUDENT ENROLMENT FORM

1. Name of Training Centre:.....
2. Full Name of the Candidate:
(in Capitals)
.....
3. Date of Birth: Age:.....
Day Month Year (Age 18 to 35 Years are eligible)
4. Gender: (please tick) Male Female
5. Marital Status:
6. Father's/Husband's/Guardian's Name:
7. Guardian's Contact Number: Occupation:
8. Mailing Address (in block letters):
.....
..... Pin Code:
- Tel. No..... Mobile:
- E.mail ID (if any):
9. Nationality:
10. Whether Physical Handicapped? : (Write '1' for Yes, '2' for No)
11. Community (please tick) SC ST OBC GENERAL
12. Aadhar Number:.....
(I)Enrolment Id:..... Voter Id:.....
If Aadhar Card is not available:
13. Bank Account Number:..... IFSC:.....
Bank Name:..... Branch:.....
14. Religion (please tick) Hindu Muslim Sikh Others

Paste your recent
passport size colour
photograph

