Remark

STUDENT ENQUIRY FORM

COURSE INFORMATION:

- **Course** _____

- **Why you want to join this course:** Personal Interest ☐ Academic Needs ☐

  Future Perspective ☐ Job/Employment ☐

PERSONAL INFORMATION:

- **Full Name:** _____

- **Email Address:** _____

- **Contact Number:** _____

- **WhatsApp Number:** _____

Current Profile: (Tick the appropriate option)

- Student ☐ Specify Class _____

- Working ☐ Specify Occupation _____

- Looking for Job ☐ Specify Last Degree _____

In case of Student:

- **Name of School/College:** _____

- **Parent Occupation:** Father_____

  Mother_____

TECHNICAL SKILLS & COURSE HISTORY:

- **Computer Knowledge:** _____

- **Any Course Done Previously?** Yes ☐ No ☐

  If Yes, Please specify **Name of Institute:** _____

OBSERVATION:

A/N: GOOD ☐ AVG ☐ POOR ☐   Q/A: GOOD ☐ AVG ☐ POOR ☐   F/C: GOOD ☐ AVG ☐ POOR ☐

Signature Counsellor   Signature Student

FOLLOW UPS REPORT

Date	Remark	Next Follow Up Date	Follow up done by (Signature)	Inspection done by (Signature)

Checked by Center Head   Checked by ISDM HO