

Trainee Application Form (Technical Trainee)

Please affix your
recent passport size
color photograph
here
(Mandatory)

College/Institute & City :

Current Course & Specialization :

Flexible to all LTIMindtree Development Center / Customer Site: ☐ Yes ☐ No

PERSONAL DETAILS	FULL NAME IN BLOCK LETTERS							Date of Birth (DD-MM-YYYY)	Age		
	Mr. / Ms. / Mrs.										
	Title		(NAME)		(MIDDLE NAME)		(SURNAME)				
	Nationality:	State of Domicile:		Marital Status:		Physical Challenges: (If Any)	Major illness / operations so far:				
	Languages Known:		Any Outstanding Academic/Extra-curricular Achievements:								
	Strong Technical Subjects: (Eg: Java, DBMS etc.)		Technical Certifications (if any): Eg: OCJP, etc.		Details of Projects Undertaken (In brief):		Work Experience (if any) Organization details, from and to date:				
	Family Background:		Name		Age		Relationship		Occupation		
	(Please give full details of family members including parents, spouse, siblings and other dependents)										
	EDUCATIONAL DETAILS	Qualification	Specialization	Institute Name		University/ Board	Month and Year of Passing		Fulltime Course (Yes/No)	% or CGPA	Total No. of ATKT/ Backlogs
SSC/X		NA								NA	
HSC/XII										NA	
Diploma											
Graduation											
Post-Graduation											
Current course details (Semester-wise): BE/BTech/MCA/BSc/BCA					Aggregate Percentage in the current course:						
Academic Year		Year/Semester	No. of ATKT/ Backlogs	% of marks	Academic Year	Year/Semester	No. of ATKT/ Backlogs	% of marks	Total No. of Backlogs (Dead and live) throughout Diploma+Graduation+ Post Graduation:		
		1st				5th					
		2nd				6th					
	3rd				7th						
	4th				8th						
CRIMINAL RECORD	HAVE YOU EVER BEEN INVOLVED IN ANY CRIMINAL PROCEEDINGS / CONVICTED OF ANY OFFENCE? IF YES, GIVE DETAILS										
DECLARATION	DECLARATION UNDER SECTION 314 OF COMPANIES ACT, AS AMENDED IN 1974 (Tick whichever is applicable)										
	I hereby declare that I am not connected with any of the Directors of the Company as his partner or his relative as defined under section 6 of the Companies Act 1956									<input type="checkbox"/>	
	OR										
	I hereby declare that I am a partner or relative of a Director of the Company as									<input type="checkbox"/>	
	RELATIVES / ACQUAINTANCE IN L&T GROUP OF COMPANIES										
	NAME		RELATIONSHIP		POSITION		COMPANY & TELEPHONE NOS.				
I declare that the information given above is true to the best of my knowledge and I understand that any false information, misrepresentation or omission of facts called for in this application, or other company records may result in my immediate dismissal without notice even if subsequently employed. I authorize the company to do any kind of background verification of my education, experience or references.											
Date:											
Place:					Signature:						