

Student/Parent/Relative/Guardian Consent Form

I -----(Father/Mother/Relative/Guardian) of Mr/Ms. -----
support my ward to join rQlik Educational Trust for a 3-month fresher programme from
Monday -Friday (9:00 AM – 1:00 PM) starting on -----.

and

I ----- (Student First Name, Last name)

Date of Birth: ----- Pan Card No: ----- Aadhar Card No: -----

Residence Address: -----

hereby undertake/cause my ward to ensure the following:

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|--|-----------------|
| 1. I will be able to give 90% or more attendance during the course duration | Yes/ No |
| 2. I understand coursework is delivered online using Google Meet / Zoom/Slack / or other platforms | Yes/ No |
| 3. I will make sure to not have other commitments conflicting during the course hours. | Yes/ No |
| 4. I will never indulge in any kind of unethical practice (sharing code/ Materials etc.) | Agree/ Disagree |
| 5. I am ready to adhere to Course timings for Full time (9:00 AM to 1:00PM for 5 days a week) | Yes/ No |
| 7. I am keen on working in IT Jobs after the completion of the course | Yes/ No |
| 9. I have read and understood the liability clause if I drop out after the assessment period or for any other reasons. | Yes/ No |
| 10. I will be available in rQlik training zone office & attend classes in person | Yes/ No |
| 11. I read, understood and agree to rQlik code of conduct and T&C completely. | Yes/ No |

Signature

Applicants Name:

Date:

Signature

Parent/Guardian Name:

Date: