

## **SmartBTR Institute of Technology**



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## APPLICATION FORM

**Application ID:** 119

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Email: ewf@gmail.com



Father's name:	ewfwf	Phone:	8796857458
Gender:	Male	Date-of-Birth:	2023-11-15
Course:	Web Design	Qualification:	Graduated
Address : grwg			

**Note: Office Use Only** 

Declaration: I hereby declare that I have paid the said amount for my Course at SmartBTR Institute of Technology.

OFFICE SEAL AND SIGNATURE

Place:

**Dated:**