

DATE:....(DD/MM/YYYY)

Government Recognized An ISO 9001 : 2008 Certified

Form No.

INDIAN ACADEMY OF FIRE AND SAFETY

Affiliated by NCVRT{NATIONAL COUNCIL OF VOCATIONAL RESEARCH TRAINING} (Government Of India)

ADMISSION CUM EXAMINATI	ON FORM
All entries must be filled by the candidate himself/herself in capital letters.	1
"NA" where Not applicable in the box. The Application Form content of the Second Secon	Do not use pin or stapler.
PROGRAMME OF STUDY COURSE CODE*: SESSION*:	Year * :
COURSE APPLIED FOR*:	
PERSONAL INFORMATION	
NAME OF CANDIDATE*: (As Entered In Secondary / Senior Secondary Certificate)	
FATHER'S NAME*:	
MOTHER'S NAME*:	
DATE OF BIRTH*: MALE FEMALE NATIONALITY:	
HOME ADDRESS: HEIGHT:	
CITY/ TOWN*:	
STATE: E-MAIL:	
PIN CODE : AADHAR	NO.*:
MOBILE NO.*: MOBILE N	NO.*:
Sr. No. EXAM. PASSED NAME OF BOARD / UNIVERSITY MARKS OBTAINED YEAR OF PASSING TICK IN APPROPRIATE BOX: Mark sheet / Certificate Xerox College or School Living Certificate ID CARD Three Photos DECLARATION (by the applicant): I have carefully read the rules and regulation given here in and shall abide by them. I also hereby declare that the information provided by me in the application form is true and correct to the best of my knowledge.	
NOTE: Fee once paid will not be refunded. No carry forward of fees, once remitted. The student must complete the course in the batch he / she is admitted to. DATE:	
PLACE :	SIGNATURE OF CANDIDATE
FOR AUTHORIZED TRAINING CENTER USE ONLY	
ATC CODE NO.:	Form No.
ATC NAME & ADDRESS :	