



Registration Form



Training Center Name : Softpro-VZM-Parvathipuram
Training Center Address : Parvathipuram
Course Name/Sector : FEB-SI Tourism & Hospitality
Batch Start Date : 07-02-2019
Batch End Date : 21-03-2019
Course Duration : 340hrs
Assessment Date : 22-03-2019



Personal Details

First Name:	Chetla	Last Name:	Kiran
Gender:	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth:	___/___/___
Marital Status	<input type="checkbox"/> Married <input checked="" type="checkbox"/> Single	Age (Years):	
Mobile Number:	9121689175	Landline Number:	
E-mail ID:	Kiran.chetla478@gmail.com	Aadhaar Card / EID No.:	

Address Details

Current Address		Permanent Address	
Door Number:	0-0	Door Number:	
Street Name:	Turakala Street	Street Name:	
Village /City:	Gangubilli	Village /City:	
District:	Vizianagaram	District:	
State:	Andhra Pradesh	State:	
Pin code:	535463	Pin code:	

Family Details

Family Details		Guardian's Details	
Fathers' Name:	Srinivasarao	Guardian's Name:	
Mother's Name:	Sujatha	Relationship:	
Father's Occupation:	Farmer	Occupation:	
Mother's Occupation:	House wife	Guardian's Contact No. :	
Father's Contact No. :	6300808223		
Family Income:	60,000	Category:	
Religion:	Hindu	Caste:	

Education Details

Education Details		Work Experience	
Education Qualification:	10th	Experience in Years:	
Pass out year:	2015	Current Employer:	
Institution:	BSE	Employer Address:	
% Marks obtained:	75%		

Payment Details			
Student Name:			
Course Name:			
Total Fees:		Agreed Amount:	
Discount Amount:			
Discount Summary:			
Payment Type:	EMI	Lump sum	
Payment Now:		Next Payment date & Amount	
Receipt No. :		Admission Date:	
Documents to be enclosed			
Sl. No.	Documents to be attached	✓	Not Applicable
1	Identity Proof (DL, Election Card, Pan Card, Ration card)	✓	
2	Mark Sheet - Highest Qualification	✓	
3	Address Proof - Pan Card, Ration Card	✓	
4	Employment Letter or proof of Working People	✓	
5	Photocopy of Receipt Slip	✓	
6	Any other, please specify		
Bank Account Details			
Account No. :			
Branch:		IFSC Code	

Student Declaration:

I Kiran S/O Srinivasa Rao declare that all information provide by me is true to best of my knowledge and belief. I hold myself solely responsible if any information is falsely provided or found incorrect.

Disclaimer: "By signing this enrolment form the candidate authorizes National Skill Development Corporation to use the data provided herewith"

Date: parvathipuram
Place:

ch. Kiran
Signature of the Candidate

[Signature]
Authorized Signatory

