



Registration Form



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a caiming Center Name		n-passethipuna			
Training Center Address	:	Ripubia m			
Course Name/Sector	: F. 50 T S. 1. TO	unisin so ttospite	alin a		
Batch Start Date	: 07-6	2-2019 - 61			
Batch End Date		2-2019	The second secon		
Course Duration		- Land			
Assessment Date		3 2019			
F	Persona	l Details			
First Name:	Kanni	Last Name:			
Gender:	□ Male □ Female	Date of Birth:	pavan tamas		
Marital Status	☐ Married ☐ Single	Age (Years):	10-08-2000		
Mobile Number:	8688723320	Landline Number:			
E-mail ID:		Aadhaar Card / EID No.:	8688723320		
	parankuma 1100 6 g	Details	762270434080		
Curren	nt Address	-	nt Address		
Door Number:	0.0.	Door Number:	Address		
Street Name:	22-91	Street Name:			
Village /City:	Sariki Street	Village /City: •			
District:	pasua this puran	District:			
State:	Vitianagarah	State:			
Pin code:	Andhera penderl				
The Court	535501	Pin code:			
Pare 1	Family				
Family Details Fathers' Name:		Guardian's Details			
Mother's Name:	madbu sudhana Pag	Guardian's Name:			
	laxmi	Relationship:			
Father's Occupation:	- lannen	Occupation:			
Mother's Occupation:	Housewife.	Guardian's Contact No.:			
Father's Contact No.:	8688723320				
Family Income:	69,000	Category:			
Religion:	Hindu.	Caste:	BC-B.		
Education Details		Work Experience			
Education Qualification:	10th.	Experience in Years:			
Pass out year:	Man-2015	Current Employer:	TALL THE TAL		
Institution:	BIL	Employer Address:			
% Marks obtained:	6.3%		N march 18		
	0.07				

		Pa	ayment Details					
Student Nam	e:			TA T				
Course Name	2:				7 - 2			
Total Fees:		Agreed A	mount:					
Discount Amount:								
Discount Sur	nmary:							
Payment Type: EN		EMI		Lump sum				
Payment Now:			Next Pay Amount	Next Payment date & Amount				
Receipt No. :			Admissio	Admission Date:				
		Docum	nents to be enclosed	d				
Sl. No.	Documen	cuments to be attached			1	Not Applicable		
1	Identity	dentity Proof (DL, Election Card, Pan Card, Ration card)			~			
2	Mark Sh	Mark Sheet - Highest Qualification			~			
3	Address	Address Proof - Pan Card, Ration Card			~			
4	Employr	Employment Letter or proof of Working People			-			
5	Photocop	Photocopy of Receipt Slip			1			
6	Any othe	Any other, please specify						
	PA BASS	Banl	k Account Details					
Account No.	:	39106100003	348.					
Branch:		Darvothipuran		IFSC Code		BAPBOPAYVAT		

Student Declaration:

I David no 12 umas S/O modbus side 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:

Place: Daniathipupam.

K. Pavan Kumay Signature of the Candidate

Authorized Signatory