

Registration Form



Training Center Name Training Center Address Course Name/Sector Batch Start Date Batch End Onto Course Duration Assessment Date	: Parvethipura : Field technició : 10/07/2019 : 19/09/2019 : 495 : 20/09/2019	the one of security and state and of the state of the security and the sec	
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2	Merk Sheet -	Highest Qualification			1	
3	3 Address Proof - Pan Card, Ration Card				1	
4	4 Employment Letter or proof of Working People				1	
5	Photocopy of Receipt Slip				1	
б	Any other, pl	ease specify		İ		
		Bacek	Account Detail	les	1	
Account No.	2	fox 20012				
Meanch:		508 28513 Kurupam		IFSC (Code	SBIN 0002752

Student Declaration:

1 Barnika Govinda so Sambasetti 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 constraint form the confidence anticome anticomed Shift Floreit, meet Corporation to use the data provided herewith"

Place: porvathipuram

Signature of the Candidate

Authorized Signates









Candidate Registration Form

Centre Candidate ID: S-AP04421-0000054

Please tick to Confirm Correctness

Candidate Course Details:

Scheme: Pradhan Mantri Kaushai Vikas

Yolana 2.0 CSSM

Training Type: Short Term Training

Sector: Bectronics and Hardware

Sub-Sector: Electronics and Hardware

Job Role: Field Technician - Computing and Peripherals

Where did you hear about Pamphlets

the scheme?:

Conveyance and Boarding Conveyance

Preference?:

Date of Registration: 22 Jun 2019



Candidate Identity Details:

Candidate Name: Barnika Govinda

S/O Sambasətti

Gender: Male

Year/Date of Birth: 01 Jul 1996

Addhaar Number: XXXXXXXXX7713

Addhaar Verification Status: Successful

Passport Number:

Passport Explry Date:

Auchaar Enrolln ent

Number:

DAKE Type of Disability?.

Disability Category:

UDID Cord Number

Education Attained: 11th to 12th

Category: OSC

Minarity:

Alternate ID Type: Atternate ID No:

NPC! Bank Name:

Candidate's Addinger is not seeded to any bank account.

Please request the candidate to seed one of his / her bank accounts with Addhoar Number by visiting the bank branch with Addhoar details

Candidates not having a valid bank account are requested to open an account with a bank and seed it with Addhadr.Such candidates can continue with the Enrolment and Training.

Please inform the candidate that his / her reward money and other payments due to the candidate will only be transferred to his / her Addhaar seeded bank account.

Candidate Contact Details:

Address: 2-9.Gadaba

Street Jlyvammavalasa,

Jiyyammavalasa, Merangi S.O. Ulwernmovalasa Vizlanagararn,

Andhra Prodesh, Plncade-

838526

Mobile Number: 6304210994

Landline Number:

E-mall ID:

Condidate Bank Account Details:

Name as in bank: Barnka Govinda

Bank Account Number: 32060838513

IFSU Code: SBIN0002752

Eank Name: KURUPAM

In case of providing Alternate (D.G.e. only ID apart from Addhour), I confirm that the SPIA / TC has informed me that the reward money and other payments due to me will only be transferred to the bank account provided above.

If I have not provided any bank details I will not claim any payments due to me at a later stage,

Candidate TC details:

TC Name: SCFTPRO-VZM-PARVATHIPURAM

Partner Name: SOFTPRO COMPUTER EDUCATION

TC ID: 17441

Address: Krishna Nursing Home Back Skie,

18-86(B), Vizianugaram Andhra

Pradesh, Vizianagaram Andhra

Pradesh 53550

Declaration:

I agree that my Aadhaar Number will be shared with National Payments Corporation of India (NPCI) for verifying if the Aadhaar Number is seeded with a Rank

I confirm that the TC / SPIA has informed me that my reward money and other payments due to me will only be transferred to my Addhaar seeded bank associated.

In case of providing Alternate ID (i.e. any ID apart from Aadhaar), I confirm that the SPIA / TC has informed me that the reward money and other payments due to me will only be transferred to the bank account provided in section "Candidate Bank Account Details" above.

If I have not provided any bank details I will not claim any payments due to me at a later stage.

B. Govinda Candidate's Signature

For Irolning Centra Use:

SDMS Condidate ID:

Authorized Signatory

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Training Feedback Form - PMKVY

Trainee Name: B. Gounda Training Center Name: Soft									
Job Role Enrolled:	FTCP/ Electronics	Cer	ter Id	1:	+	+P	CO	3571	
Training Start Date:	10/07/2019	Ват	ch id	:	3	302	55		
Trainer's name:	Y. Calashmanapao	St Enrole	udent nent	_	the fillings				
A) About Train	er and Training (Kindly tick one option)								
Particulars		Strong! Agree	A 1	Agree	Disa	gree	1	ongly agree	
The Trainer is Kno	owiedgeable			V					
Adequate time is clearing doubts	provided for questions & discussion, and	V							
The topics mentio class	ned in the Course outline are taught in the			/		/			
The trainer demor	nstrates the use of Tools & Equipment to			V					
conduct the traini	ng (if applicable)						1	-	
conduct the traini	ng (if applicable) cted regularly and on time	V		V					
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Trainee's Signature & Govinfo.

Date 10/02/2015

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SECONDARY SCHOOL CERTIFICATE

REGULAR

PC/06/05150/078639/4

CERTIFIED THAT

BARNIKA GOVINDA

FATHER NAME :

B SAMBASETTI

MOTHER NAME:

B PAPAMMA

bearing Roll No.

1106131174

belonging to

Z P HIGH SCHOOL - JIYYAMMAVALASA

tas appeared and PASSED SSC EXAMINATION held in MARCH 2011 in

GRADE

TELUGU

as medium of instruction.

DATE OF BIRTH

01/07/1996

ZERO ONE

ONE NINE NINE SIX

THE CANDIDATE SECURED THE FOLLOWING MARKS AND GRADES

THE RESIDENCE OF THE PROPERTY	Marks Secured (in figures)	Marks Secured (in words)	Grade
SUBJECT ANGUAGE : (TELUGU) 86	EIGHT SIX	A2
IRST GATE	66	SIX SIX	C1
HIRL LENGO	81	EIGHT ONE	81
MATHEMATICS :	72	SEVEN TWO	B2
GENERAL SCIENCE :	81	EIGHT ONE	B1
SOCIAL STUDIES	81	THREE EIGHT SIX	
TOTAL : .	386		B2
SECOND LANGUAGE : (HINDI	68	SIX EIGHT	B1
GRAND TOTAL :	454	FOUR FIVE FOUR	

Life Skills Education : GRADE SECURED :

REGHT SIDE OF THE NECK. Marks of Identification IT A MOLE ON THE

2 A MOLE DA THE LEFT

Head of Institution with School Stamp

6.800000000 18/11 Head Master Z. P. HIGH SCHOOL

Date of issue: 21" May, 2011 1. Use skills Education :The Grade shall be incorporated by the respective seas of the Institution

1. Use skills Education: The Grade shall be incorporated by the respective mean of the institution of the certificates to the candidates. Before delivery of the certificates to the candidates. Before one year from the date of issue. Any corrections in the certificate will not be entertained after one year from the date of issue. 3. Any unauthorised correction in the certificate will result in cancellation of certificate. 3. The Marks with asterisk indicate the old marks secured in previous appearances.

2011

BOARD OF SECONDARY EDUCATION



SI No. M441510



24/24199/M441510



Board of intermediate Education, A. P.

Vidya Bhavan, Nampally, Hyderabad - 500 001







INTERMEDIATE PASS CERTIFICATE CUM MEMORANDUM OF MARKS

This is to certify that BARNIKA GOVINDA

Father Name : B SAMBASETTI

Mother Name : B PAPAMMA

bearing

Registered No.

1324223317

has appeared at the Intermediate Public

Examination held in

MARCH-2013

and passed in A GRADE

TELUGU

as the medium of Instruction.

was examined and the marks awarded are as follows: The subjects in which he Marks Maximum Maximum Marks Secured Marks Subject Secured Marks 100 086 100 **ENGLISH** Part - 1: 100

074 091 100 090 TELUGU Part - 2: 044 Part - 3: 075 062 075 Optional Subjects MATHEMATICS - A 063 075 075 075 MATHEMATICS - B 029 060 053 060 PHYSICS 045 060 041 060 CHEMISTRY 025 030 PHYSICS PRACTICAL 027 030 CHEMISTRY PRACTICAL E D

ENVIRONMENTAL EDUCATION Q 805 Total Marks In Figures *EIGHT**ZERO***FIVE* In words 26-04-2013 Date

Controller of Examinations

Principal and College Seal
IGIBILITY RULES ARE OVERLEAF * INDICATES MARKS OBTAINED AT AN EARLIER EXAMINATION

1324223317



బారత ప్రభుత్వం

Government of India



బార్నిక గోవింద Barnika Govinda

పుట్టిన తేదీ/DOB: 01/07/1996 పురుషుడు / Male

4105 1260 7713



ఆధార్ – సామాన్యుని హక్కు



Unique Identification Authority of India

చిరునామా: S/O: బి సంబశెట్టి, 2-9 గదబ స్టీట్, జియ్యమ్మవలస పల్లి ಜಿಯ್ಯಮ್ಮ ಎಲಸ ಮಂದಲಂ, ಜಿಯ್ಯಮ್ಮ ಎಲಸ జియ్యమ్మవలస, విజయనగరం, ఆంధ్ర ప్రదేశ్ 535526

Address: S/O: B Sambasetti, 2-9, Gadaba Street, Jiyyammavalasa Village, Jiyyammavalasa Mandalam, Jiyyammavalasa, Jiyyammavalasa, Vizianagaram, Andhra Pradesh, 535526

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neip@uidai.gov.in



www.uidai.gov.in

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ard No P Shop No	ame of Head of ousebold ලේකුදු කිරා	father/ Husband name: Lateyendusetti නුසූරම් සි Date of Birth: රාගානා/ Age : 58	aoe. 30./House No. නිය /Street	Village Mandal æg /District

LPG Consumer No. (1); /(No Cylinder) Annual Income (Rs.) ; 10,000

LPG Dealer Name (1)

LPG Consumer No. (2): /No Cylinder LPG Dealer Name (2):

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Clos	=	Closure	int/in	=	Interest	S/D/W/H/o	=	Son/Daug
C6II	=	Collection	lon/In	=	Loan	tr/trf/xfer	-	Transfer
Comm	=	Commission	min	=	Minimum	TT	÷	Telegraphic Transfer
CDR/CORR	=	Correction	os	=	Outstanding	txn	=	Transaction
CR	=	Credit	P&T	=	Postage & Telegram	Wdl	Ξ	Withdrawal
csh	=	Cash	Pos	=	Point of Sale	+MOD Bal	=	total balance(SB+linked MOD a/c)
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भारतीय स्टेट बैंक

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State Bank of India

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RARVATISTIRAM

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CHE NO

S/D/W/H/D A/C NO: 32060838513

Address AR COLLEG PHINOM RENGI G M VALASA

SMOUNTPAM

Phone: 8 Engle / 1 / morte

Non Str (Provision for Future use)

-- Phone: 225136 Email-sa 6.75 asbi co in Branch

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