

April Amorandhie

Registration Form



Course Name

Batch End Date

Course Duration



	Persona	d Details		
First Name:	Vegiveddi	Last Name:	Dadma	
Gender:	Yegiveddi □ Male ☑ Female	Date of Birth:	15/6/1999	
Maritai Status	☐ Married ☐ Single	Age (Years):		
Mobile Number:	9515603568	Landline Number:	20	
E-mail ID:		Aadhaar Card / EID No.:	140 CO15 (000	
	yegireddipadma@ gmail.com Address	s Details	[H5499656789	
Curre	nt Address			
Door Number:	1 10 0	Permanent Address		
Street Name:	1-125	Door Number:		
	Sivaloyam street	Street Name:		
Village /City:	parvatipuram	Village /City:		
District:	Vizianagaram	District:		
State:	Andhapradish	State:		
Pin code:	C3.5 501	Pin code:		
	Family	Details		
Famil	y Details	Guardian	'e Dataile	
Fathers' Name:	Papi Maidu	Guardian's Name:	's Details	
Mother's Name:				
Father's Occupation:	Appala Nazacam	Occupation:		
Mother's Occupation:		Guardian's Contact No.:		
Father's Contact No. :	Housewife.	San and a Contact No. 1	OF A STREET MANUFACTURE	
Family Income:	9515603568	Cotomon		
Religion:	60,000	Category:		
	Hindu	Caste:		
Education Details		Work Ex	perience	
Education Qualification:	10+6	Experience in Years:		
Pass out year:	2015	Current Employer:		
nstitution:	BSE.	Employer Address:		
% Marks obtained:	28.10			

		I	Payment Details		
Student Nan	ne:				
Course Nam	ie:				
Total Fees:	19		Agrand Asses		
Discount Amount:		Agreed Amount:			
Discount Sur					
Payment Type: EMI		EMI	Lump sum		
Payment Now:			Next Payment date & Amount		
Receipt No.:			Admission Date:		
		Docum	nents to be enclosed		
Sl. No.	Documents to be attached			-	Not Applicable
1	Identity Proc	Proof (DL, Election Card, Pan Card, Ration card)			
2					C. Carlotte
3		Mark Sheet - Highest Qualification			
	Address Proof - Pan Card, Ration Card			V	
4	Employment Letter or proof of Working People			V	
5	Photocopy of Receipt Slip			1	
6	Any other, please specify				
		Bank	Account Details		
ecount No. :	04	-23		•	
Branch:		IFSC			

Student Declaration:

I Le give di padma S/O Papi Naidu 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:

Place: paniathipuram

padma

Signature of the Candidate

Authorized Signatory