



Registration Form



Training Center Name : Soft pro - paruvathipuram
 Training Center Address : paruvathipuram
 Course Name/Sector : ETCP - electronics
 Batch Start Date : 10-07-2019
 Batch End Date : 19-09-2019
 Course Duration : 4.95
 Assessment Date : 20-09-2019



Personal Details			
First Name:	<u>Marisarla</u>	Last Name:	<u>Santhosh kumar</u>
Gender:	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth:	<u>1/1/</u>
Marital Status	<input type="checkbox"/> Married <input checked="" type="checkbox"/> Single	Age (Years):	
Mobile Number:	<u>8179031344</u>	Landline Number:	
E-mail ID:	<u>santhoshkumar@gmail.com</u>	Aadhaar Card / EID No.:	
Address Details			
Current Address		Permanent Address	
Door Number:	<u>3-36</u>	Door Number:	
Street Name:	<u>Jagannadhapuram</u>	Street Name:	
Village /City:	<u>chinamerangi</u>	Village /City:	
District:	<u>Vizianagaram</u>	District:	
State:	<u>Andhra Pradesh</u>	State:	
Pin code:	<u>535526</u>	Pin code:	
Family Details			
Family Details		Guardian's Details	
Fathers' Name:	<u>Gowthamaidu</u>	Guardian's Name:	
Mother's Name:	<u>Gowamma</u>	Relationship:	
Father's Occupation:	<u>farmer</u>	Occupation:	
Mother's Occupation:	<u>House wife</u>	Guardian's Contact No. :	
Father's Contact No. :	<u>8179031344</u>		
Family Income:	<u>60,000</u>	Category:	
Religion:	<u>Hindu</u>	Caste:	
Education Details		Work Experience	
Education Qualification:	<u>10th</u>	Experience in Years:	
Pass out year:	<u>2016</u>	Current Employer:	
Institution:	<u>B&T</u>	Employer Address:	
% Marks obtained:	<u>83</u>		

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, M. Santhosh Kumar / M. Gowarunaidu 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:

M. Santhosh Kumar
Signature of the Candidate


Authorized Signatory



Training Feedback Form - PMKVY

Trainee Name:		Training Center Name:	Soft pro
Job Role Enrolled:	FTCP	Center id :	APC03571
Training Start Date:	10-07-2019	Batch id :	30255
Trainer's name:	Y. laxman rao	Student Enrolment No :	S-AP04421-0000089

A) About Trainer and Training (Kindly tick one option)

Particulars	Strongly Agree	Agree	Disagree	Strongly Disagree
The Trainer is Knowledgeable				
Adequate time is provided for questions & discussion, and clearing doubts	✓			
The topics mentioned in the Course outline are taught in the class	✓			
The trainer demonstrates the use of Tools & Equipment to conduct the training (if applicable)	✓			
Classes are conducted regularly and on time		✓		

B) About The Training Venue (Kindly tick one option)

Particulars	Excellent	Good	Average	Poor
The Center and Labs/ Workshop is hygienic and safe	✓			
The workshop/ Lab is good in terms of space, lighting and seating arrangement	✓			

C) Awareness on PMKVY (Kindly tick one option)

Particulars	Yes	No
Were you briefed about PMKVY In the beginning of the course	✓	
Have you watched the PMKVY Animation Video	✓	
Have you been provided the PMKVY booklet/ Pamphlet at the beginning of the course	✓	
How did you first come to know about PMKVY	friend.	

D) (Kindly tick one option)

	Excellent	Good	Average	Poor
How would you rate the training overall	✓			

Trainee's Signature

M. Santhosh kumar

Date

14/07/2019

Training Feedback Form - PMKVY

Trainee Name:	K. Santhosh Kumar	Training Center Name:	Soft pro
Job Role Enrolled:	FTCP	Center id:	APC03571
Training Start Date:	10-07-2019	Batch id:	30255
Trainer's name:	Y. Laxman Rao	Student Enrolment No:	S-AP04421-0000089

A) About Trainer and Training (Kindly tick one option)

Particulars	Strongly Agree	Agree	Disagree	Strongly Disagree
The Trainer is Knowledgeable				
Adequate time is provided for questions & discussion, and clearing doubts	✓			
The topics mentioned in the Course outline are taught in the class	✓			
The trainer demonstrates the use of Tools & Equipment to conduct the training (if applicable)	✓			
Classes are conducted regularly and on time		✓		

B) About The Training Venue (Kindly tick one option)

Particulars	Excellent	Good	Average	Poor
The Center and Labs/ Workshop is hygienic and safe	✓			
The workshop/ Lab is good in terms of space, lighting and seating arrangement	✓			

C) Awareness on PMKVY (Kindly tick one option)

Particulars	Yes	No
Were you briefed about PMKVY in the beginning of the course	✓	
Have you watched the PMKVY Animation Video	✓	
Have you been provided the PMKVY booklet/ Pamphlet at the beginning of the course	✓	
How did you first come to know about PMKVY	friend.	

D) (Kindly tick one option)

	Excellent	Good	Average	Poor
How would you rate the training overall	✓			

Trainee's Signature M. Santhosh Kumar

Date 14/07/2019



Skill India
असतो मा सद्गमय



N.S.D.C.
National
Skill Development
Corporation
Transforming the skill landscape

SDMS
SKILL DEVELOPMENT MANAGEMENT SYSTEM

PMKVY
प्रधानमंत्री कौशल विकास योजना

Candidate Registration Form

Centre Candidate ID : S-AP04421-0000089

Please tick to Confirm Correctness ☒

Candidate Course Details

Scheme: Pradhan Mantri Kaushal Vikas
Yojana 2.0 CSSM

Date of Registration : 03 Jul 2019

Training Type: Short Term Training

Sector: Electronics and Hardware

Sub-Sector: Electronics and Hardware

Job Role: Field Technician - Computing
and Peripherals

Where did you hear about
the scheme?: Pamphlets

Conveyance and Boarding
Preference?: Conveyance



Candidate Identity Details

Candidate Name: Marisarla Santhosh Kumar
S/O Gowrunaidu

Type of Disability?: None

Disability Category:

Gender: Male

UDID Card Number:

Year/Date of Birth: 15 Jun 2000

Education Attained : 11th to 12th

Aadhaar Number: XXXXXXXX9194

Category: OBC

Aadhaar Verification Status: Successful

Minority:

Passport Number:

Alternate ID Type:

Passport Expiry Date:

Alternate ID No:

Aadhaar Enrollment
Number:

NPCI Bank Name:

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

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

Candidates not having a valid bank account are requested to open an account with a bank and seed it with Aadhaar. 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 Aadhaar seeded bank account.

Candidate Contact Details

Address: 3-36, BOMMIKA
JAGANNADHAPURAM,
Chlamerangi, Merangi S.O.,
Jyammavalasa, Vizianagaram,
Andhra Pradesh, Pincode-
535526

Mobile Number: 8179031344

Landline Number:

E-mail ID:

Candidate Bank Account Details

Name as in bank: Marisarla Santhosh Kumar

IFSC Code: SBIN0002752

Bank Account Number: 34452853699

Bank Name: KURUPAM

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 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: SOFTPRO-VZM-PARVATHIPURAM

Address: Krishna Nursing Home Back Side,

TC ID: 17441

18-86(B), Vizianagaram, Andhra

Partner Name: SOFTPRO COMPUTER EDUCATION

Pradesh, Vizianagaram Andhra

Pradesh 535501

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 Bank.

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 Aadhaar seeded bank account.

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.

M. Santhosh Kumar
Candidate's Signature

For Training Centre Use:

SDMS Candidate ID: SAP04421-0000089

Authorized Signatory

G. m. w.




భారత ప్రభుత్వం
Government of India



మరిసర్ల సంతోష్ కుమార్
Marisarla Santhosh Kumar
పుట్టిన తేదీ/ DOB: 15/06/2000
పురుషుడు / MALE



6922 1780 9194

నా ఆధార్, నా గుర్తింపు



అర్థిక విశిష్ట గుర్తింపు ప్రాధికార సంస్థ
Unique Identification Authority of India

చిరునామా:

S/O: మరిసర్ల గౌరునాథుడు, ఇంటి
నెం 3-36, బొమ్మిక జగన్నాథపురం,
బొమ్మిక జగన్నాథపురం, విజయనగరం,
ఆంధ్ర ప్రదేశ్ - 535526

Address:

S/O: Marisarla Gowrunaidu, H No
3-36, bommika jagannadhapuram,
Bommika Jagannadhapuram,
Vizianagaram,
Andhra Pradesh - 535526

6922 1780 9194



1947



help@uidai.gov.in

www

www.uidai.gov.in

Generally used abbreviations

a/c	= Account	dep	= Deposit	Pr	=
Adj	= Adjustment	Dft	= Draft	Proc	=
Amt	= Amount	Dish/dsh	= Dishonour	rd	=
Ar	= Arrear	DR	= Debit	Ret/Rtn	=
bal	= Balance	DoB	= Date of Birth	Rnd	=
Capn	= Capitalization	eft	= Electronic Fund Transfer	SB	=
chg/ch	= Charge	Inop	= Inoperative	SC	=
Chq	= Cheque	Ins	= Insurance	SI/So/SORD	= Standing Instruction
Clos	= Closure	int/in	= Interest	S/D/W/H/o	= Son/Daughter/Wife/Husband of
Coll	= Collection	lon/ln	= 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	= Withdrawal
csn	= Cash	Pos	= Point of Sale	+MOD Bal	= total balance(SB+linked MOD a/c)



A/c No: 34452853699

भारतीय स्टेट बैंक
State Bank of India

Stock No. 1-280, Comp. No. 1002805
200199004

BASIC SAVINGS BANK INR

CIF No : 87948023219

Account No : 34452853699

Customer Name: Mr. MARISARLA SANTHOSH KUMAR

S/D/W/H/o: COWRI NAIDU

Address: 8 J PURAMVIL & (PO),

JIYYAMMAVALASA(MNDL)

Phone: 09177275834

Email:

D.O.B. (If minor): 15/06/2000

MOP.: (Provision for Future use)

Phone: 225136

Email: sa.02752@sbi.co.in

Branch Code: 2752

Date of Issue: 03/12/2014

03/12/2014 5065283 2752

FSC: 981N0002752 शाखा प्रबंधक

Branch Manager

Toll Free Contact No. : 1800112211, 18004253800