



Regd. with Ministry of Skill Development & Enterprises
Govt. of India

ENROLLMENT FORM

Enrollment no.....

Course Applied For

* **Session -**

1. Candidate Name.....

2. S/o,D/o.W/o Shri.....

3. Mother's Name

4. Date of Birth

5. Sex

6. Nationality

7. Address

.....

8. Contact No.

9. Category Gen, OBC, SC, ST, Other (**Specify**)

10. Email Id

11. Training Center-

11. Qualification:-

S.No.	Examination	Board/University	Year of Passing	Mark Obtain	% of Marks

Affix 3
Passport Size
Photo

Date:-

Signature of Candidate