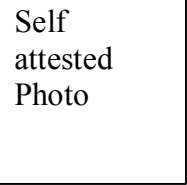


SL. No.

APPLICATION FORM
(To be filled in Block Letters)



Name of the candidate: _____
Father's / Guardian Name: _____
Date of birth (DD-MM-YYYY): _____ Gender MALE FEMALE (Please Tick in a appropriate Box)
Permanent Address: _____
Pin code: _____
Present Address: _____
Pin Code: _____
Phone Number: (STD) _____ (Landline) _____ (Mobile) _____
E-Mail ID: _____
Educational Qualification (if you are in UG final year, mention 'pursuing final year')

| Sl.No | Exam Passed | Year of Passing | Name of Institute | Board / University | Subjects | % of Marks |
|-------|-------------|-----------------|-------------------|--------------------|----------|------------|
| | | | | | | |
| | | | | | | |
| | | | | | | |

Professional Qualification:

| Sl.No | Course Name | Year | Name of Institute | Board / University | % of Marks |
|-------|-------------|------|-------------------|--------------------|------------|
| | | | | | |
| | | | | | |
| | | | | | |

Bank Draft No: _____ Amount: _____ Dated: _____

Name of the Bank: _____ Place: _____

Declaration

I do hereby declare that all the information furnished above is true to the best of my knowledge and belief. If any information found incorrect, the department have the right to cancel my application.

Signature of the Candidate