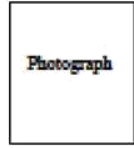




सत्यमेव जयते

GOVERNMENT OF INDIA
MINISTRY OF SKILL DEVELOPMENT AND ENTREPRENEURSHIP
DIRECTORATE GENERAL OF TRAINING
NATIONAL SKILL TRAINING INSTITUTE
VIDYANAGAR CAMPUS, HYDERABAD 500007, TELANGANA.



APPLICATION-CUM-REGISTRATION FORM FOR ADMISSION TO AVTS COURSE

(NOTE : Form to be filled in block letters by the candidate in his / her own hand writing)

Course Code:	Course Name:	
From:	To:	Weeks :

1. Name in capital letters	
2. Father's name:	

Gender:	M	F	Nationality:	Category:	GEN	SC	ST	OBC	EX-S	PH
Date of Birth (dd/mm/yyyy)										
Address for communication:										
AADHAR No.							PIN			
Email :					Mobile:					

9. Details of qualifying examination passed/pursuing (ITI/ Diploma / B.Sc. / B.E. / B.Tech / M.Tech .) Enclose photocopies of consolidated marks memo & provisional certificate (BRING ORIGINAL CERTIFICATES FOR VERIFICATION AT THE TIME OF ADMISSION)

Name of the Exam	University / Board / Council	Trade / Branch / Group	Year / Reg. No.	Completed /Pursuing	Marks Obtained & Max Marks	% of Marks / Div.
SSC						
Intermediate (10+2)						
ITI/Diploma						
BE/B.Tech						

Note: Director may change/cancel/defer any programme without assigning any reason. The fee once paid is not refundable. In case the programme is cancelled, the fee paid will be adjusted for any other course of the same duration.

I hereby declare that the information given above is true and correct to the best of my knowledge

Date:

Signature of the Candidate

FOR OFFICE USE ONLY

The Candidate is eligible for admission / Not eligible for admission.

Section Name	Name and Signature of section Incharge	Remarks
		May be admitted / Not Qualified