

**NATIONAL INSTITUTE OF TRAINING AND EDUCATION**

AN AUTONOMOUS ORGANIZATION, REGD BY GOVT OF NCT - DELHI UNDER ITA 1882 GOVT OF INDIA

RUNNING UNDER NATIONAL POLICY ON EDUCATION 1986 - MHRD GOVT OF INDIA

NATIONAL SKILL DEVELOPMENT ORGANIZATION, PROMOTED BY GOVT OF INDIA

AN ISO 9001 : 2015 CERTIFIED ORGANIZATION

**Center Code:****Admission No:****STUDENT APPLICATION FORM**

Course Name & Duration: _____

Batch Period: from _____ To _____

Name of the Candidate: _____

(In Capitals as per SSC)

Father Name: _____

(In Capitals as per SSC)

Mother's Name: _____

Affix Pass photo
Size Recent
Photograph

Date of Birth: _____ Educational Qualification: _____ Aadhaar No: _____

Residential Address: _____

Candidate contact No: _____ Parent Contact No: _____

Training Center Name: _____

Declaration: I declare that the above information is true and correct to the best of my knowledge and belief. If any information given above is found incorrect/false, I shall be liable for the punishment as per rule/law and my application would be liable to be cancelled without further consideration.

Date:**Signature of the Centre Director with seal****Signature of the student**