



Application form for “Skilled Manpower”

Name:

Father’s Name :

Date of Birth:

Permanent Address:

Affix a passport-size photo

Correspondence Address:

Gender:

E-Mail (mandatory):

Mobile Number (mandatory):

Qualification Details (10th onwards):

Sl. No	Name of the Examination	University/Board/Institute	Year of Passing	Division/ Class

Experience Details:						
Sl. No.	Company/Firm/Institute/Any Other Organization	Date of Joining	Date of Leaving	Salary per month	Field of Experience	Total Experience

I hereby declare that the entries in this form are true to the best of my knowledge and belief, I understand that my candidature will be canceled if any of the information is found to be false or incorrect. Further, if selected, I will abide by the rules and regulations of the Institute and also the directions given to me from time to time.

Date:
Place:

Signature