

Dr. Radhakrishnan Institute of Information Technology & Research Center



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CANDIDATE REGISTRATION FORM

Under

PRADHAN MANTRI KAUSHAL VIKAS YOJNA

(P.M.K.V.Y.)

Sector :-.....

Job Role :-.....

Center ID:-.....

SDMS Enrolment Number:-.....

Self-Attested
Candidate
Latest Color
Passport Size
Photo

First Name

Last Name

1. Candidate Name :-..... :

2. Date of Birth :-..... Gender :- M F

3. Caste Category :-..... Religion:

4. Aadhar Card No :-

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5. Trainee Address:-

..... Pin Code :-

Trainee District:..... Trainee State:.....

6. Guardian Type:- S/o D/o

First Name

Last Name

7. Father Name :-

8. Mother Name :-

9. Pre Training Status: Yes No

10. Contact No. (Land line): Mobile

11. Email Address:

12. Education Level:- 8th 10th 12th Graduate

13. Education Technical :

14. Bank Detail :

Bank Name: Branch :

Account Number :-

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IFSC CODE:-

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15. Course Duration Days:-

16. Course Duration Hours per Day:-

By signing this enrolment form the candidate authorizes National Skill Development Corporation to use the data Provided here with"

DATE:-

(Candidate Signature)

Center Head Sign With Seal