

## APPLICATION FORM - APPRENTICE TRAINEE

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1.	Name of the (In Block Lett						Latest Passport  Size Colored		
2.	• •	ntion Trade/Discipline Apprentice	ne) :				Photograph		
	• Tech	nician Apprentice							
3.	NCVT/BOAT	Registration No. :							
4.	Father`s/Mother's Name :								
5.	Date of Birth & Age :								
6.	Gender:				Male / Female / Others				
7.	Marital Status :				Unmarried / Married / Single				
8.	Category:				GEN GEN-EWS GEN-EWS OBC (Non Creamy Layer)				
9 (i) (ii)	Whether belongs to a Disability Category: If yes, indicate the type of Disability				Yes / No  a. Blindness or Low Vision/ b. Hearing Impairment/ c. Locomotor Disability or Cerebral Palsy d. Others				
(iii)	Percentage of Disability :								
10 (i)	Present Add	lress :							
(ii)	Permanent Address :								
11	Mobile No. :								
12	Email Id :								
13	Aadhar No. :								
14. Ac	ademic Quali	fications (start witl	n Matricu	latio	n/Higher Se	econdary or equival	ent):		
Examination Passed (Degree/ Diploma/ Certificate)		Name of school/ college/univ.	Year of admission	on	Year of passing	Class/ Division, %age of marks	Subjects taken/ Discipline		
10 <sup>th</sup>									



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15. Er	mployment recor	d includi	ng Apprenticesh	nip Training, if any:						
1.	Employer									
	From	_ to	Total	Year	Month	Days				
	Position held _			Scale of Pay	(Rs.)					
	Basic Pay (Rs.)			Total Emoluments	(Rs.)					
	Duties in Detai	1								
2.	Employer									
	From	to	Total	Year	Month	Days				
	Position held Scale of Pay (Rs.)									
	Basic Pay (Rs.)	Basic Pay (Rs.) Total Emoluments (Rs.)								
	Duties in Detai	1								
16. I	certify that I fulfi Amendments		oility conditions	as per the Apprentices	Act 1961 &	Yes / No				
<u>Declar</u>	ration:									
Know	ledge and belief.	I clearly	understand tha	ed in this application ar at any mis-statement o ble to be terminated fro	of facts containe	d herein or willful				
Date _					Signature					

Signature\_\_\_\_\_