

APPLICATION FOR REGISTRATION UNDER THE APPRENTICES (AMENDMENT) ACT

1. Name (in block letters) :

2. Address with Pin code :

(in block letters)

Phone	
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3. Male/Female :

4. Age and date of birth :

5. Please specify Degree/Diploma with branch :

Details of the Course

Duration of Course	Institution	University/Board	Month & Year of passing	Division with % Marks

6A. Elective subject in the final semester/year :

7. Experience if any (as paid apprentice or in job) :

8. Whether belongs to SC/ST :

9. Establishments where he/she prefer to have Training :

10. Whether willing to work anywhere in Kerala :

11. Details of fee paid (Chalan Number, Date and Treasury) :

Station:

Date :

Signature of the applicant