

Centre Code:

Filled Form Is To Be Submitted At The Regional/Sub-Regional Centre

1. Registration No.:(For Office Use)

Date.: (For Office Use)

2. Course Opted:

Course Name:

Course Duration:

3. Name Of Student:(Fill In Block Letters In Own Hand Written)

4. Name Of Father/Guardian/Husband:(Fill In Block Letters)

5. Name Of Mother:(Fill In Block Letters)

6. Adhar Number:

7. Nationality:

8. Date Of Birth:

9. Category:

10. Sex: Male

Female

11. Marital Status: Unmarried

Married

12. Correspondence Address:

Mob: Phone:

13. Occupation:

Govt. Employed

Self Employed

Govt. Undertaking

Others

14. Academic Qualification (Enclose All Supporting Certificates In Xerox) (Please Tick)

Below 10th

10th Pass

12th Pass

Graduate

Post Graduate

Diploma

Others (IF ANY, PLEASE SPECIFY)

15. How did you get to know about SviiT:

T.V./News Paper Add.

Poster/Hording/Banner/Painting

Mrk. Exec.

Sms/ Mail

College Presentation

SviiT Student

16. Preference of Batch Timing:

Morning

After Noon

Evening

Signature Of The Parents

DATE:

Signature Of The Student
PTO for instruction

ACKNOWLEDGMENT SLIP

SI No.



Received Form (Student's Name).....S/O, D/O, W/O
..... for along with required documents.

Date:

Authorised Sign & Stamp