Application for the post of "Trade Apprentice"

Affix recent selfattested passport size photograph

Name of the Trade:	
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Registration Number (Mandatory) 2. Name(in Capital Letters as in SSC) 3. Father's Name: 4. Mother's Name: 5. Gender 6. Date of Birth and Age 7. Nationality and Religion 8. Category SC/ST/OBC/PWD/General 9. Aadhaar/ UID Number 10. Marital Status 11. Address for Correspondence District: State: 12. Permanent Address District: State:	1.	Ministry of Skill Development & Entrepreneurship Online		
SSC) 3. Father's Name: 4. Mother's Name: 5. Gender 6. Date of Birth and Age 7. Nationality and Religion 8. Category SC/ST/OBC/PWD/General 9. Aadhaar/ UID Number 10. Marital Status 11. Address for Correspondence District: State: 12. Permanent Address District: State:		Registration Number		
4. Mother's Name: 5. Gender 6. Date of Birth and Age 7. Nationality and Religion 8. Category SC/ST/OBC/PWD/General 9. Aadhaar/ UID Number 10. Marital Status 11. Address for Correspondence District: State: 12. Permanent Address District: State:	2.			
5. Gender 6. Date of Birth and Age 7. Nationality and Religion 8. Category SC/ST/OBC/PWD/General 9. Aadhaar/ UID Number 10. Marital Status 11. Address for Correspondence District: State: 12. Permanent Address District: State:	3.	Father's Name:		
6. Date of Birth and Age 7. Nationality and Religion 8. Category SC/ST/OBC/PWD/General 9. Aadhaar/ UID Number 10. Marital Status 11. Address for Correspondence District: State: 12. Permanent Address District: State:	4.	Mother's Name:		
7. Nationality and Religion 8. Category SC/ST/OBC/PWD/General 9. Aadhaar/ UID Number 10. Marital Status 11. Address for Correspondence District: State: 12. Permanent Address District: State:	5.	Gender		
8. Category SC/ST/OBC/PWD/General 9. Aadhaar/ UID Number 10. Marital Status 11. Address for Correspondence District: State: 12. Permanent Address District: State:	6.	Date of Birth and Age		
9. Aadhaar/ UID Number 10. Marital Status 11. Address for Correspondence District: State: 12. Permanent Address District: State: 13. Contact Mobile Number 14. e-Mail ID	7.	Nationality and Religion		
10. Marital Status 11. Address for Correspondence District: State: 12. Permanent Address District: State: 13. Contact Mobile Number 14. e-Mail ID	8.	Category	SC/ST/OBC/PWD/General	
11. Address for Correspondence District: State: 12. Permanent Address District: State: 13. Contact Mobile Number 14. e-Mail ID	9.	Aadhaar/ UID Number		
District: State: 12. Permanent Address District: State: 13. Contact Mobile Number 14. e-Mail ID	10.	Marital Status		
12. Permanent Address District: State: 13. Contact Mobile Number 14. e-Mail ID	11.	Address for Correspondence		N.
District: State: 13. Contact Mobile Number 14. e-Mail ID			District:	State:
13. Contact Mobile Number 14. e-Mail ID	12.	Permanent Address		
14. e-Mail ID			District:	State:
	13.	Contact Mobile Number		
15. Any physical deformity Yes/ No	14.	e-Mail ID		
	15.	Any physical deformity	Yes/ No	

16.	If Yes, state & Enclose Certificate	×		
17.	Height & Weight	Height:	Weight:	

18. Educational/ Technical Qualifications						
Examination passed	Name of Institution	Year	Subject	Marks	Class/Di vision % of Marks	

Certified that the above information is correct and true. If found false, my application will be rejected and if the training has begun, I will be removed from the training, apart from recovery of the Stipend and cost of training.

Date:

Place:

Signature of Candidate