MSME-Development Institute, GANGTOK

Registration / Application Form
(To be filled by the candidate)

Photo

Trainee Code: [ ] (for office use only)

Course/Topic Name: [ ]

Duration: From: [ ] To: [ ] Place: [ ]

*Name of Candidate: [ ] [ ] [ ]
(As per 10th certificate) First Name   Middle Name   Last Name

*Father's Name: [ ] [ ] [ ]
First Name   Middle Name   Last Name

*Date of Birth: [ ]
(Ex: 02/Oct/1993)

*Gender: [ ] Male [ ] Female

*Category: [ ] **SC** [ ] ST [ ] OBC [ ] General
(Attach cast certificate if : SC/ST/OBC)

*Whether Physically Handicaped: [ ] Yes [ ] No

*Whether Minority: [ ] Yes [ ] No Religion: [ ]

*Highest Education: [ ]

*Identity Document: **10th/ Aadhar No** Document No.: [ ]
(Attach 10th /Aadhar) (Roll No./ Aadhar No.)

Phone No.: [ ] — [ ]
(STD Code) (Phone No.)

*Mobile No.: [ ]

Address: [ ]

*City: [ ] *Distt.: [ ]

Pin: [ ] *State: [ ]

Email Address: [ ]

*Fee Paid: [ ]

*Trainee's Objective: | **Self Employment** | **Wege Employment** | **Not Yet Decided** |

Enclosure:

(Signature of the candidate)