



**Amurajan Master
Mind Computers**

Registration Form

Photo

Registration No.

Course Name

Name

F/H Name

Date of Birth

Address

Contact No.

Email

Profession ☐ Employee ☐ Businessman ☐ Student ☐ House Wife

☐ Searching for new opportunity ☐ Others

Highest Qualification Details

☐ Below 10th ☐ 10th ☐ 12th ☐ Graduate

☐ PG Diploma ☐ PG Degree ☐ Other Qualification

Qualification	Year	Board/University	% of Marks
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

I hereby declare that the information given above is correct to the best of my knowledge.

Date:

Place:

Student's Signature

For NITC Use Only

- ☐ All fields are complete.
☐ Photograph is affixed.
☐ ID Proof is attached.
☐ Form is signed.

Verified by

Authorised Training Centre
Stamp & Signature