

Target Skill India Education and Vocational Council (Page - 1)

# TARGET SKILL INDIA EDUCATION AND VOCATIONAL COUNCIL टारगेट स्किल इंडिया एजुकेशन एंड वोकेशनल काउंसिल (An Autonomous Body, Recognized by Government of India) tsevcindia@gmail.com | Website: www.tsevc.org

### **APPLICATION NUMBER:**

# **APPLICATION FOR ADMISSION**

	NAME OF THE CENTRE						
	(use only BLACK or BLUE Hi-Tec point pen to fill up the form)  COURSE APPLIED FOR  COURSE CODE						
	NAME OF THE CANDIDATE						
	D.O.B GENDER:						
	MALE FEMALE TRANSGENDER						
	AADHAR NUMBER						
	NATIONALITY INDIAN NRI OCI FOREIGN POI CATEGORY (Tick any one) SC ST OBC GENERAL GENERAL (EWS)						
	RELIGION PERSON WITH DISABILITY DISABILITY PERCENTAGE						
	NAME OF THE PARENT / GUARDIAN						
	ADDRESS FOR CORRESPONDANCE (DO NOT REPEAT NAME)						
ADMISSION							
	CITY PIN CODE						
MIS	STATE						
	STD CODE TELEPHONE NUMBER MOBILE NUMBER						
FOR							
NO O	EMAIL ADDRESS						
APPLICATION FO	LANCUACES (ALOVA)						
PL	LANGUAGES KNOWN						
A							
2							
TSEVC	PHOTOGRAPH						
LS	LEFT THUMB IMPRESSION OF APPLICANT						
	Paste your recent passport						
	size color photograph not older than 3 months.						
	Do not pin or staple  SIGNATURE OF APPLICANT						
	Sign within the box without touching the edges  DI FACE TIIRN OVER! FAE						

# Target Skill India Education and Vocational Council (Page - 2)

## **Educational Qualification:**

(DETAILS OF 10th, +2, Any Degree)

S.NO	INSTITUTION	SUBJECTS	MARKS OBTAINED	PERCENTAGE	YEAR OF PASSING		
LIST OF ENCLOSED DOCUMENTS (TICK ALL APPLICABLE)							
TRANSFER CERTIFICATE MARK SHEET COMMUNITY CERTIFICATE VOTER ID / AADHAR ID							
SCHOOL /COLLEGE MARK SHEET No.							
SCHOOL / COLLEGE TC No.							
<b>DECLARATION:</b> I hereby assure that all the information furnished above are true to the best of my knowledge. In the event of any information being found incorrect, I shall be liable to cancellation at any time and I shall not entiled to claim refund							
of any fee paid by me to the institution. I promise that i will obey the Rules and Regulations of the Institution.							
SIGNATURE OF PARENT / GUARDIAN SIGNATURE OF CANDIDATE							
72 30 10 10 10							
		FOI	R OFFICE USE ONLY				
	MR. / MS. / MRS.				HAS BEEN REGISTERED		
MR. / MS. / MRS HAS BEEN REGISTERED							
FOR THE ADMISSION OF THE COURSE FOR THE ACADEMIC							
YEAR	YEAR WITH ALL ELIGIBLE QUALIFICATION						
DIACT							
PLACE DATE :				SIGNATURE OF TH	E CENTRE CO-ORDINATOR		
DAIL				(W	ITH SEAL)		