

## अण्डमान तथा निकोबार द्वीपसमूह खादी तथा ग्रामोद्योग मंडल A & N ISLANDS KHADI & VILLAGE INDUSTRIES BOARD पोर्ट ब्लेयर / PORT BLAIR

Nam	Affix a passport size photograph			
1.	Name of the Candidate [in BLOCK LETTERS]	:		
2	Name of Father / Husband	:		
3	Gender	:	Male Female	
4	Address for communication	:		
5	Contact No.	:		
6	Date of Birth (Enclose Photo Copy of necessary Certificate)	:		
7	Community (Enclose Photo Copy of the Category Certificate)	:	SC ST OBC Gen	
8	Academic Qualification	-	VIII pass X Pass Diploma XII pass Under Graduate Post Graduate	
9	Technical Qualification (If any) [Enclose supporting documents]	:		

## I hereby declare that:

- > the statements made above are true to the best of my knowledge.
- > I shall produce all original certificates for verification at the time of admission.
- > I hereby undertake and agree to abide by all the rules and regulations of the training centre.
- > I also undertake to agree to refund the stipend given to me to the commission in the event of leaving the course in the middle.

Place : Date :	Signature of the Applicant
<b>Encl.</b> : 1.	
2.	
3.	
4.	

> I shall be liable to be expelled at any time during the training if in the opinion of the training centre, I am found to be unfit for undergoing training or my conduct is found to be

## FOR OFFICIAL USE ONLY

Admitted to Training in :
Duration of the Course :
Date of Admission :

unsatisfactory.

**Nodal Officer, SDP**