



NATIONAL YOUTH COMPUTER EDUCATION & TRAINING

REGISTRATION FORM

FORM NO.

(USE BLOCK/ CAPITAL LETTERS ONLY)

STATE CODE

A.S.C. CODE

SESSION

STUDENT ROLLNO

COURSE NAME

COURSE CODE

DATE OF ADMISSION/...../.....

VALID UP TO

PASSPORT
SIZE
COLORED
PHOTO

1. STUDENT'S NAME.....

SIGNATURE OF THE CANDIDATE

2. FATHER'S NAME.....

3. MOTHER'S NAME.....

4. GUARDIAN'S NAME.....

5. CATEGORY (TICK ✓) GENE ST SC OBC HANDICAPPED

6. SEX (TICK ✓) MALE FEMALE 7. NATIONALITY

8. DATE OF BIRTH/...../.....

9. PERMANENT ADDRESS :-

VILL. P.O.

P.S. DIST.

PIN NO. MOB.NO.

STATE. ADH. NO.

10. EDUCATIONAL QUALIFICATIONS-

SL.NO.	EXAM.PASS	BOARD/UNIVERSITY	YEAR OF PASSING	MARKS OBTAINED	% OF MARKS	DIV./GRADE
1.						
2.						
3.						

DECLARATION

ALL THE INFORMATIONS GIVEN ABOVE ARE TRUE TO THE BEST OF MY KNOWLEDGE AND NOTHING IS CONCEALED THEREIN. I HAVE READ AND UNDERSTOOD THE TERMS AND CONDITIONS MADE BY NYCET AND ACCEPT THE SAME. IN CASE OF ANY INFRINGEMENT OF SAID TERMS AND CONDITIONS BY ME, NYCETH.O. / CENTRE HEAD SHALL HAVE FULL RIGHT TO CANCEL ABOVE MENTIONED CERTIFICATE/ DIPLOMA COURSE AND I SHALL ONLY BE LIABLE FOR THE SAME.

SIGNATURE OF GUARDIAN

SIGNATURE OF CENTRE DIRECTOR
WITH SEAL

SIGNATURE OF STUDENT

DATE.....

OFFICE USE ONLY

RECEIVING DATE..... AUTHORISED SIGNATORY.....