



R

SANJAY GANDHI COMPUTER SAKSHARTA MISSION

An autonomous institution registered under the public trust act 1882(regd. No.-2327)

An ISO 9001: 2015 Certified Organization

ADMISSION FORM

CENTER NAME.....

SERIAL NO.....

YEAR.....

Candidate Name

Father's Name

Mother's Name

Present Address

Permanent Address

Date of Birth Sex
M F

Date of Admission

Educational Qualification

Name of Course

Religion
H M C O

Registration No.

Cont. No

Signature of Student

Course:

- | | |
|----------------------------|---------------------|
| 1. Computer Courses | 6. Yoga Course |
| 2. Boutique Courses | 7. Advance Course |
| 3. Beautician Courses | 8. English Speaking |
| 4. Teacher Training Course | 9. UG & PG Course |
| 5. Nielit Course | 10. Others |

DECLARATION

I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it. I hereby authorize sharing of the information furnished on this form with the Sanjay Gandhi computer saksharta mission.

Signature of the Student

Date.....

Notes:-

- 1.Exams are Compulsory of Exam date.
- 2.If any misbehavior/ malpractice will found during exam, the copy will be cancelled by the Examiner.

VERIFICATION

It is certified that all entries in this form have been duly checked by me and found correct in all respects.

DATE

**Signature and Seal of
Centre Head**