Pratheeksha

Application Form for the Sponsorship of MBBS /Engineering /B.Pharm/ Nursing / Diploma / ITI

Name of the Candidate :

Date of Birth :

Name of Guardian :

Relationship with Guardian :

Present Address :

Permanent Address :

Telephone/Mobile No. :

Email ID :

Annual income :

Whether you belong to the BPL Category : YES/NO

If yes pl give the ref.no. of the certificate issued by appropriate authorities

Qualification

Name of Course	Board /University	% of mark	Year of passing
SSLC			
HSC			

Name of the Course pursuing :

Name & Address of the institution :

Declaration

I certify that the above information is correct and true to the best of my knowledge and belief. I understand and agree that in the event of any information being found false or in-correct,my application is liable to be rejected at any stage of processing.

Place :
Date :
Signature of the Applicant