



GOVERNMENT OF TRIPURA
WOMEN'S POLYTECHNIC

*P.O: AMTALI VIA SEKEREKOTE
HAPANIA, TRIPURA (W), PIN- 799130*



REGISTRATION FORM FOR SKILL TRAINING

**Paste recent
passport size
photograph**

1. Name (In English Block letters):.....
2. Date of Birth (DD/MM/YYYY):
3. Fathers'/ Husband's Name:
4. Fathers'/ Husband's occupation:.....
5. Interested job roles for training:.....
6. Address for correspondence:.....
7. Permanent address:
8. Phone/ Mobile No.....
9. Aadhar No:.....
10. E-mail address (available):
11. Caste category: SC/ST/OBC/UR:.....



Self Declaration I hereby declare that all the particulars given by me in the application form are true. Copy of the documents to be enclosed. School/ College pass mark sheet (in which DOB is mentioned, or certificate with mark sheet) & any one of the documents for identification of proof viz Aadhaar Card, Voter Id card, driving license or Ration card.

Signature of the Applicant.

Date:

Place:

Name of the Applicant.