

SST

Computer Educations

(Regd. Trademark Under Govt. of India)

AN ISO 9001:2008 CERTIFIED INSTITUTION

APPLICATION

Reg No.

CENTRE NAME : _____

Enq. No.

CENTRE CODE :

(Office use only)

Affix
Stamp Size
Photo

1. Name (in Capital) :

2. Date of Birth : : : 3. Age :

4. Gender : M F

5. E-mail id (if any) :

6. Residential Address :

Tel Pin

7. If Employed / Student :

| | |
|-------------------------------|----------------------|
| Designation / Standard | <input type="text"/> |
| Office/College/School/Address | <input type="text"/> |
| City / Town | <input type="text"/> |

8. Educational Qualification : X/XII Graduate Post Gra Diploma
 Verified & Checked

9. Parent's / Spouse Name :
(Tick whichever is applicable)

a. Designation & Phone Number PH

b. Office Address

PH

10. Course Applied for : _____ Course Name _____

