Application Form for Skill Development / Skill Upgradation Courses Sponsored by Directorate of Employment & Craftsmen Training, Labour Department, Meghalaya, Shillong

					Dated			
To,								
				<u></u>				
Sir,	I beg	to apply for admiss	ion for Short T	erm Course in _	NAME OF C	COURSE	at	
	NAME O	F TRAINING CENTRE	and furn	ish the facts belo	w.			
					Sianatu	re of Applica	nt	
1.	Full name in (Capital Letters:			Signata	re of Epphour		
2.	Date of birth							
2		Year	Month	Dat				
3.	Place of birth		Police Statio	n District	State			
4.	Father's/Mother's and Husband's name (in case of married female) (Please do not use initials):							
5.) Present Address in full:			
			- -					
6.	Reference: Na to vouch for y	ame and Address of t	_	persons in your l	ocality who w		ared	
7.	Are you a citi necessary)	zen of India? If so, h	ow? (copy of a		icate should be		here	
8. Sl. N o		Qualification (please a		Certificates, Mark Examination		Division		
31. NO). Name	e of institution and	auuress	Examination	rasseu	DIVISION		
2.								
3.								
4.								
9.	(a) Community: (b) Are you a member of Scheduled Caste/Scheduled Tribe/Permanent Resident of Meghalaya? Answer 'Yes' or 'No'. If 'Yes' give particulars supported by a Certificate (copy to be enclosed):							
10.	Present Occupation, if any:							
11.	Details of Registration Card of the Employment Exchange of the State (copy to be enclosed):							
<u>Note</u> :	2. The follow (i) Education	or receipt of Applicating documents mustional/Technical Qua (iv) Proof of Age (be enclosed:- alification (ii)	Proof of Reside				