

SUPERVISORY DEVELOPMENT CENTRE, KALAMASSERY
DEPARTMENT OF TECHNICAL EDUCATION, GOVT. OF KERALA
APPLICATION FOR REGISTRATION UNDER THE APPRENTICES (AMENDMENT) ACT

1. പേര് (മലയാളത്തിൽ) :
 Name in block letters (English) :
2. Address for communication :
 (in block letters)

Adhar. No.						
Dist.						
Pin						

3. Phone No. :
4. E-mail ID :
5. Male/Female/Transgender :
6. Age and Date of Birth :
7. Physically Handicapped : Yes/No (if yes, enclose certificate)
8. Please specify Degree/Diploma with branch :
9. Details of the qualification (Those who send by post, please attach self attested copies of consolidated mark list and Provisional/Original Certificate and original chalan)

Duration of Course	Institution & Place	University / Board	Month & Year of Passing	% of Marks	Class

10. Have you undergone training under Apprentice Act elsewhere : Yes / No
11. Experience if any :
12. Caste and Religion :
13. Whether belongs to : GN / SC / ST / OBC / OEC
14. Whether willing to work anywhere in Kerala :
15. "Details of fee paid (attach original Chalan)

Chalan No.	Chalan Date	Amount	Name of Treasury

Place: _____
 Date: _____ Signature of the Applicant

"Fee: Rs. 75/- for Degree holders and Rs. 60/- for Diploma holders (For SC/ST Rs. 40/- and Rs. 30/- respectively on production of Community Certificate). Please remit the amount at any Treasury in Kerala in the Head of Account 0202-02-800-94-OR

NB: Application may be sent to: Assistant Director, Supervisory Development Centre, N.A.D. Road, Kalamassery -683 104, Ernakulam, Ph: 0484-2556530.