

APPLICATION FORM

SHORT TERM CERTIFICATE COURSE IN "ARCHIVES MANAGEMENT"

1. Name of Applicant (In block letter) :
2. Father's/Mother's/Husband's/Spouse Name :
3. Date of Birth :
4. Age on last date of submission of Applications :
5. Category : General _ SC ST PH _ OBC
6. Gender : M F
7. Local / Postal Address :
Tel. No. / E-mail ID if any :
8. Permanent Address :
9. Name & address of the Sponsoring Department, if employed. :
10. Post held at present if any :
11. **Qualification):**

(a) Academic qualification :

Examination Passed	Subject	Year of passing	Marks	Percentage/Grade Of Marks	Name of Board/University

(b) Professional qualification :

Examination Passed	Subject	Year of passing	Marks	Percentage/Grade Of Marks	Name of Institution

12. Upload qualification document :
13. Upload sponsorship letter if employed :
14. Upload Photo :
15. Upload Signature :
16. E- Payment :